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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT ₩ over the lines American Hospital Association PAC 325 Seventh Street, NW ADDRESS (number and street) Suite 700 Check if different than previously Washington DC 20004 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** ZIPCODE A CITY A IS THIS NEW **AMENDED** C00106146 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) 12-Day (c) Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12S) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Х Runoff (30R) Special (30S) Post -Election General (30G) Report for the: Termination Report (TER) in the 02 2010 DC 11 Election on State of 10 14 2010 22 2010 11 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Ms. Melinda Hatton Type or Print Name of Treasurer Electronically Filed by Ms. Melinda Hatton 12 02 2010 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004) Only

FE6AN026

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

2 / 261

Write or Type Committee Name American Hospital Association PAC

FEC Form 3X (Rev. 02/2003)

	_	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 20 10 Y Y Y		2190847.18
(b) Cash on Hand at Begining of Reporting Period	1483411.02	
(c) Total Receipts (from Line 19)	342787.98	1693980.71
(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1826199.00	3884827.89
'. Т	otal Disbursements (from Line 31)	297577.79	2356206.68
В	Cash on Hand at Close of Reporting Period Subtract Line 7 from Line 6(d))	1528621.21	1528621.21
th	Debts and Obligations owed TO ne committee (Itemize all on Schedule C and/or Schedule D)	0.00	
th	Debts and Obligations owed BY The committee (Itemize all on Schedule C and/or Schedule D)	0.00	

X This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

3 / 261 FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

American Hospital Association PAC

Report Covering the Period:

м м 1 0 From:

D D 14

2 0 1 0

D D 22

^Y 2 0 1 0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From: (a) Individuals/Persons Other		
Than Political Committees (i) Itemized (use Schedule A)	201065.69	765902.92
(ii) Unitemized	55790.08	320121.94
(iii) TOTAL (add Lines 11(a)(i) and (ii)	256855.77	1086024.86
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)(d) Total Contributions (add Lines	0.00	0.00
11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	256855.77	1086024.86
Transfers From Affiliated/Other Party Committees	81800.00	571482.61
3. All Loans Received	0.00	0.00
Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	14637.54
Refunds of Contributions Made to Federal candidates and Other Political Committees	4000.00	19750.00
7. Other Federal Receipts (Dividends, Interest, etc.)	132.21	2085.70
Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
9. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	342787.98	1693980.71
. Total Federal Receipts (subtract Line 18(c) from Line 19)	342787.98	1693980.71

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)

of Disbursements

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures: (a) Shared Federal/Non-Federal		1
Activity (from Schedule H4)	0.00	0.00
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	-524641.17	12739.37
(c) Total Operating Expenditures		
(add 21(a)(i), (a)(ii) and (b))	-524641.17	12739.37
Transfers to Affiliated/Other Party Committees	0.00	0.00
3. Contributions to	5.00	0.00
Federal Candidates/Committeesand Other Political Committees	161350.00	1430225.31
Independent Expenditure (use Schedule E)	658868.96	910324.50
5. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
5. Loan repayments wave		
7. Loans Made	0.00	0.00
(a) Individuals/Persons Other Than Political Committees	0.00	725.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	0.00
(such as PACs)(d) Total Contribution Refunds	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	725.00
O. Other Disbursements	2000.00	2192.50
Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity		
(from Schedule H6)	0.00	0.00
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	297577.79	2356206.68
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)	007577.70	0050000
from Line 31)	297577.79	2356206.68

DETAILED SUMMARY PAGE

of Disbursements

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	256855.77	1086024.86
34.	Total Contribution Refunds (from Line 28(d))	0.00	725.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	256855.77	1085299.86
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	-524641.17	12739.37
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	14637.54
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	-524641.17	-1898.17

FE6AN026

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 261 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. Michael J. Rock			Date of Receipt
Mailing Address 325 Seventh Street, NV Suite 700	V		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 18680728
Washington	DC	20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		100.00
Name of Employer American Hospital Associa-	Occupatio Sr Asso	n ciate Director	
tion-Washingt Receipt For:	-	e Year-to-Date ▼	_
Primary General Other (specify) ▼	Aggregate	350.00	
Full Name (Last, First, Middle Initial) Ms. Cheryl Nester-Wolfe			Date of Receipt
Mailing Address 252 Muirfield Avenue S	SE .		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 18680976
Salem	OR	97306-8594	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		350.00
Name of Employer Salem Hospital	Occupatio Sr. VP, F	n Patient Care, Chief Nursing C	Of
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Ms. Mary Ann Hewston, MPM, BSN,			Date of Receipt
Mailing Address 10501 State Hwy 285			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 18681048
Conneaut Lake	PA	16316	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Meadville Medical Center	Occupatio Director,	n Clinical and Support Service	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)			700.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. John H Tobin		Date of Receipt
Mailing Address 64 Robbins Street		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City <u>Waterbury</u>	State Zip Code CT 06708-2600	Transaction ID: 18681054 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Waterbury Hospital	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms Nancy Harris Mailing Address P O Box 250		Date of Receipt
		10 18 2010
City Marshall	State Zip Code MO 65340-0250	Transaction ID: 18681064
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 400.00
Name of Employer Fitzgibbon Hospital	Occupation Chief Financial Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) Mr. John F Bringhurst		Date of Receipt
Mailing Address Box 589		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18681089
Petersburg FEC ID number of contributing federal political committee.	AK 99833-0589	Amount of Each Receipt this Period 500.00
Name of Employer Petersburg Medical Center	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		1400.00
TOTAL This Period (last page this line numbe	r only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 261 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Peter J Holden Mailing Address 275 Sandwich Street City Plymouth FEC ID number of contributing federal political committee. Name of Employer Jordan Hospital Receipt For: Primary General Other (specify)	State Zip Code MA 02360-2183 C Occupation President and Chief Executive Officer Aggregate Year-to-Date 1100.00	Date of Receipt M M
Full Name (Last, First, Middle Initial) Mr. Gary L Brewer Mailing Address 1906 Blake Avenue City Glenwood Springs FEC ID number of contributing federal political committee. Name of Employer Valley View Hospital Receipt For:	State Zip Code CO 81601-4227 C Occupation Chief Executive Officer Aggregate Year-to-Date	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Peter E Makowski Mailing Address 4231 West 16th Aver City Denver FEC ID number of contributing federal political committee.	State Zip Code CO 80204-1335	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer St. Anthony Central Hospital Receipt For: Primary General Other (specify) ▼	Occupation Chief Executive Officer Aggregate Year-to-Date 250.00	

SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	I Statements may not be sold or used by any per he name and address of any political committee	son for the purpose of soliciting contributions
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Margaret D Sabin		Date of Receipt
Mailing Address P O Box 7021		10 15 / Y Y Y Y Y
City Colorado Springs	State Zip Code CO 80933-7021	Transaction ID: 18681940
FEC ID number of contributing federal political committee.	C 60953-7021	Amount of Each Receipt this Period 250.00
Name of Employer Penrose-St. Francis Health Services Receipt For:	Occupation President and Chief Executive Office	er
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Charlotte Ramsey Moiling Address - COLC Creaked Stick	Mari	Date of Receipt
Mailing Address 6216 Crooked Stick	way	10 19 2010
City	State Zip Code	Transaction ID: 18682191
Radford	VA 24141-7025	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Carilion New River Valley Medical Cent	Occupation Chief Nursing Officer	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Craig J Broman		Date of Receipt
Mailing Address 1406 Sixth Avenue N	lorth	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Saint Cloud	State Zip Code MN 56303-1901	Transaction ID: 18682215 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	60.00
Name of Employer St. Cloud Hospital	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 560.00	
SUBTOTAL of Receipts This Page (optional)	•	660.00

Cambridge FEC ID number of contributing federal political committee. Name of Employer Cambridge Medical Center Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Mark A Eustis Mailing Address 2450 Riverside Avenue City Amount C Doccupation President Aggregate Year-to-Date ▼ 232.50 Date of Mailing Address 2450 Riverside Avenue Transac	utions from such committee.
A. Mr. Dennis J Doran Mailing Address 701 South Dellwood Street City State Zip Code MN 55008-1920 FEC ID number of contributing federal political committee. Name of Employer Cambridge Medical Center Primary General Other (specify) ▼ City State Zip Code Amount Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ City State Zip Code Minneapolis Mailing Address 2450 Riverside Avenue City State Zip Code Transac Minneapolis MN 55454-1450 FEC ID number of contributing federal political committee. Name of Employer Fairview Health Services President and Chief Executive Officer Receipt For: Aggregate Year-to-Date ▼ Primary General Occupation President and Chief Executive Officer Receipt For: Aggregate Year-to-Date ▼	tion ID: 18682218 of Each Receipt this Period
City State Zip Code Transac Cambridge MN 55008-1920 Amount FEC ID number of contributing federal political committee. Name of Employer Cambridge Medical Center Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Mark A Eustis Mailing Address 2450 Riverside Avenue City State Zip Code Transac Minneapolis MN 55454-1450 FEC ID number of contributing federal political committee. Name of Employer Fairview Health Services Receipt For: Aggregate Year-to-Date ▼ C C C C C C C C C C C C C C C C C C	tion ID: 18682218 of Each Receipt this Period
Cambridge MN 55008-1920 Amount FEC ID number of contributing federal political committee. Name of Employer Cambridge Medical Center Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Mark A Eustis Mailing Address 2450 Riverside Avenue City State Zip Code Transac Minneapolis FEC ID number of contributing federal political committee. Name of Employer Fairview Health Services Receipt For: Name of Employer Fairview Health Services Receipt For: Primary General Amount Pagregate Year-to-Date ▼ Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼	of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Cambridge Medical Center Receipt For: Primary General Other (specify) Mr. Mark A Eustis Mailing Address 2450 Riverside Avenue City Minneapolis FEC ID number of contributing federal political committee. Name of Employer Fairview Health Services Receipt For: Aggregate Year-to-Date Date of Minneapolis MN 55454-1450 C City Name of Employer Fairview Health Services Receipt For: Primary General Aggregate Year-to-Date Aggregate Year-to-Date Aggregate Year-to-Date Aggregate Year-to-Date F15 00	· · · · · · · · · · · · · · · · · · ·
Receipt For: Primary Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Mark A Eustis Mailing Address 2450 Riverside Avenue City State Zip Code Minneapolis Minneapolis Minneapolis Minneapolis FEC ID number of contributing federal political committee. Name of Employer Fairview Health Services Receipt For: Primary General Aggregate Year-to-Date ▼ Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼ Pull Name (Last, First, Middle Initial) Mr. Mark A Eustis Mailing Address 2450 Riverside Avenue City State Zip Code Minneapolis MN 55454-1450 FEC ID number of contributing federal political committee. Name of Employer Fairview Health Services Receipt For: Primary General Primary General Primary General Primary General Pagregate Year-to-Date ▼	
Mr. Mark A Eustis Mailing Address 2450 Riverside Avenue City State Zip Code Minneapolis MN 55454-1450 FEC ID number of contributing federal political committee. Name of Employer Fairview Health Services Receipt For: Primary General Date of M M 1 0 Transac Amount C Aggregate Year-to-Date ▼	
City State Zip Code Transac Minneapolis MN 55454-1450 FEC ID number of contributing federal political committee. Name of Employer Fairview Health Services President and Chief Executive Officer Receipt For: Aggregate Year-to-Date ▼ Primary General	Receipt
Minneapolis MN 55454-1450 Amount FEC ID number of contributing federal political committee. Name of Employer Fairview Health Services Receipt For: Primary General General Amount C Aggregate Year-to-Date ▼	19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Fairview Health Services Receipt For: Primary General C Occupation President and Chief Executive Officer Aggregate Year-to-Date	tion ID: 18682219
Fairview Health Services President and Chief Executive Officer Receipt For: Primary General F15.00	of Each Receipt this Period
Primary General 515.00	
Full Name (Last, First, Middle Initial) Mr. Bill Nelson Date of	Receipt
Mailing Address P.O. Box A	19 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
<u> </u>	tion ID: 18682301
	of Each Receipt this Period
FEC ID number of contributing federal political committee.	110.00
Name of Employer Mille Lacs Health System Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 360.00	
SUBTOTAL of Receipts This Page (optional)	182.50

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 261 (check only one) X
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American Hospital Association PA	and Statements may not be sold or used by any person ng the name and address of any political committee to so	for the purpose of soliciting contributions plicit contributions from such committee.
Full Name (Last, First, Middle Initial)	40	
Dr. Terence Pladson, , M.D. Mailing Address 1406 Sixth Avenu	e North	Date of Receipt
011	01-12 7'- 0-12	10 19 2010
City Saint Cloud	State Zip Code MN 56303-1900	Transaction ID: 18682302
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 60.00
Name of Employer CentraCare Health System	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 560.00	
Full Name (Last, First, Middle Initial) Mr. Randy Ulseth	L	Date of Receipt
Mailing Address 301 South Highwa	ay 65	10 19 2010
City	State Zip Code	Transaction ID: 18682303
<u>Mora</u>	MN 55051-1899	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	445.00
Name of Employer Kanabec Hospital	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 445.00	
Full Name (Last, First, Middle Initial) Ms. Ginger L. Bliss		Date of Receipt
Mailing Address 5403 West 161st	Terrace	M M / D D / Y Y Y Y Y Y 1 1 9 2 0 1 0
City Overland Park	State Zip Code KS 66085-7814	Transaction ID: 18684883 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer Carondelet Health	Occupation VP, Strategic Planning & Business Dev	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
SUBTOTAL of Receipts This Page (option	nal)	905.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements ma name and ad	y not be sold or used by any persondress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American Hospital Association PAC			
۱.	Full Name (Last, First, Middle Initial) Mr. William M Jennings Mailing Address 17725 Wilding Place D)r		Date of Receipt
	City	State	Zip Code	1 0 2 1 2 0 1 0 Transaction ID: 18687435
	Chesterfield	MO	63005-4279	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		350.00
	Name of Employer Bridgeport Hospital	Occupation Presiden	n it and CEO	7
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
 3.	Full Name (Last, First, Middle Initial) Dr. Joel R. Reich			Date of Receipt
	Mailing Address 71 Haynes Street			10 21 7 2010
	City	State CT	Zip Code	Transaction ID: 18687436
	Manchester FEC ID number of contributing federal political committee.	C	06040-4131	Amount of Each Receipt this Period 500.00
	Name of Employer Eastern Connecticut Health Network	Occupation Senior V	n ïce President Medical Affairs	3
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
 ;.	Full Name (Last, First, Middle Initial) Mr Vincent Capece			Date of Receipt
	Mailing Address 28 Crescent Street			10 21 2010
	City Middletown	State CT	Zip Code 06457-3650	Transaction ID: 18687437 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		350.00
	Name of Employer Middlesex Hospital	Occupation Vice Pre	n sident Finance and Treasure	er
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
s	UBTOTAL of Receipts This Page (optional)			1200.00
	OTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 261 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Dennis P McConville Mailing Address 80 Chilstone Ln			Date of Receipt
City Manchester	State CT	Zip Code 06040-5651	Transaction ID: 18687438 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		350.00
Name of Employer Eastern Connecticut Health Network Receipt For: Primary General Other (specify)		n P Planning, Marketing, Com Year-to-Date ▼ 350.00	<u>m</u> uni
Full Name (Last, First, Middle Initial) Mr. David A Whitehead Mailing Address 326 Washington Str	reet		Date of Receipt M
City	State	Zip Code	Transaction ID: 18687439
Norwich	CT	06360-2733	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		350.00
Name of Employer William W. Backus Hospita- I, The Receipt For: Primary General Other (specify) ▼		n t and Chief Executive Office e Year-to-Date ▼ 350.00	r
Full Name (Last, First, Middle Initial) Dr. Jane Deane Clark, PhD	•		Date of Receipt
Mailing Address 110 Barnes Road			10 21 2010
City	State	Zip Code	Transaction ID: 18687441
Wallingford FEC ID number of contributing federal political committee.	C	06492-1802	Amount of Each Receipt this Period 500.00
Name of Employer Connecticut Hospital Asso- ciation Receipt For:	- ' '	n irector, Healthcare Data • Year-to-Date ▼	
Primary General Other (specify) ▼	Aggregate	500.00	
SUBTOTAL of Receipts This Page (optional	<u> </u>		1200.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and	Use separate schedule(s) for each category of the Detailed Summary Page Statements may not be sold or used by any person	FOR LINE NUMBER: PAGE 14 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 1
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	he name and address of any political committee to s	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Chad Wable Mailing Address 35 Inverness Ct		Date of Receipt
		10 21 2010
Chaphira	State Zip Code CT 06410-3548	Transaction ID: 18687442
Cheshire FEC ID number of contributing federal political committee.	CT 06410-3548	Amount of Each Receipt this Period 350.00
Name of Employer Saint Mary's Hospital	Occupation President and CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr Gerald J Boisvert	_ I	Date of Receipt
Mailing Address 282 Washington Stre	eet	M M / D D / Y Y Y Y Y Y Y Y 1 0 2 1 2 0 1 0
City	State Zip Code	Transaction ID: 18687443
<u>Hartford</u>	CT 06106-3322	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Connecticut Children's Me- dical Center	Occupation Vice President and Chief Financial Off	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr Daniel E Lohr		Date of Receipt
Mailing Address 326 Washington Stre	eet	10 21 2010
City	State Zip Code	Transaction ID: 18687444
Norwich	CT 06360-2733	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer William W. Backus Hospita- I, The	Occupation Senior Vice President and Chief Finance	9
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)		1050.00

SCHEDULE A (FEC Form 3X)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) M. Initiated A Brivenia, I. FACHE Malling Address 112 Mansfield Avenue City State Zip Code Williamatic CT 06226-2041 FEC ID number of contributing federal political committee. Cell of the primary of the pri		SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Full Name (Last, First, Middle Initial) Mr. Richard A Bryenik, FACHE Mailing Address 112 Mansfield Avenue City Willimantic CI State Zip Code CT 08226-2041 FEC ID number of contributing federal political committee. Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. William Stanley Mailing Address 292 Pequot Avenue City State Zip Code CT 08320-4451 FEU ID number of contributing federal political committee. CI City State Zip Code CT 08320-4451 FEC ID number of contributing federal political committee. City State Zip Code CT 08320-4451 FEC ID number of contributing federal political committee. Name of Employer Lawrence & Memorial Hospital Other (specify) ▼ State Zip Code CT 08320-4451 FEC ID number of contributing federal political committee. Name of Employer Lawrence & Memorial Hospital Other (specify) ▼ State Zip Code CT 08320-4451 FUll Name (Last, First, Middle Initial) Mr. William Stanley Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ State Zip Code City State Zip Code Aggregate Year-to-Date ▼ Date of Receipt Transaction ID: 18687459 Amount of Each Receipt this Period Date of Receipt Transaction ID: 18687459 Amount of Each Receipt this Period Date of Receipt Transaction ID: 18687459 Amount of Each Receipt this Period Date of Receipt Transaction ID: 18687459 Amount of Each Receipt this Period Date of Receipt Transaction ID: 18687459 Amount of Each Receipt this Period Date of Receipt Transaction ID: 18687459 Amount of Each Receipt this Period Date of Receipt Transaction ID: 18687459 Amount of Each Receipt this Period Date of Receipt Transaction ID: 18687459 Amount of Each Receipt this Period Date of Receipt Transaction ID: 18687459 Amount of Each Receipt this Period Date of Receipt Transaction ID: 18687459 Amount of Each Receipt this Period Date of Receipt Transaction ID: 18687459 Amount of Each Receipt this Period Date of Receipt Transaction ID: 18687459 Amount of Each Receipt this Period Dat	7	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
FEC ID number of contributing federal political committee. Name of Employer C	∠ A .	Mr. Richard A Brvenik, , FACHE Mailing Address 112 Mansfield Avenue City		Zip Code	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Hospital Frestential and United Executive Officer Receipt For: Receipt For:		FEC ID number of contributing		06226-2041	
Mailing Address 292 Pequot Avenue City State Zip Code Transaction ID: 18687459 New London CT 06320-4451 FEC ID number of contributing federal political committee. Name of Employer Connecticut Hospital Association Receipt FC ID number of contributing federal political committee. Full Name (Last, First, Middle Initial) Ms Laura J. Hanten Jordan Mailing Address 49 Oxford St City State Zip Code Transaction ID: 18687459 Amount of Each Receipt this Period Date of Receipt Transaction ID: 18687459 Amount of Each Receipt this Period Date of Receipt Transaction ID: 18687459 Date of Receipt Transaction ID: 18687459 Date of Receipt Transaction ID: 18687460 Transaction ID: 18687460 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer Connecticut Hospital Association Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Occupation VP, Patient Care Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼		Hospital Receipt For: Primary General	Presiden	at and Chief Executive Office e Year-to-Date ▼ 500.00]
City State Zip Code New London CT 06320-4451 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer Lawrence & Memorial Hospital Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mis Laura J. Hanten Jordan Mailing Address 49 Oxford St City Hartford FEC ID number of contributing federal political committee. Capture of Employer Connecticut Hospital Association Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Occupation VP, Patient Care Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Other (specify) ▼ Aggregate Year-to-Date ▼ State Sip Code Transaction ID: 18687459 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Aggregate Year-to-Date ▼ Occupation VP, Patient Care Aggregate Year-to-Date ▼ Other (specify) ▼ Aggregate Year-to-Date ▼ State Sip Code Transaction ID: 18687459 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Aggregate Year-to-Date ▼ Other (specify) ▼ Aggregate Year-to-Date ▼ State Sip Code Transaction ID: 18687459 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. FIGURE 18687460 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. FIGURE 18687460 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. FIGURE 18687460 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. FIGURE 18687460 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. FIGURE 18687460 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. FIGURE 18687460 Amount of Each Receipt this Period FEC ID	3.	Mr. William Stanley			M M / D D / Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Lawrence & Memorial Hospital Vice President, Development Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms Laura J. Hanten Jordan Mailing Address 49 Oxford St City State Zip Code CT 06105-2915 FEC ID number of contributing federal political committee. Name of Employer Lawrence & Memorial Hospital Association Receipt For: Primary General Other (specify) ▼ Occupation VP, Patient Care Aggregate Year-to-Date ▼ State Zip Code CT 06105-2915 FEC ID number of contributing federal political committee. Name of Employer Connecticut Hospital Association Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ State Zip Code Transaction ID: 18687460 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Source Table 10		City	State	Zip Code	
Tull Name (Last, First, Middle Initial) Ms Laura J. Hanten Jordan Mailing Address 49 Oxford St City Hartford FEC ID number of contributing federal political committee. Name of Employer Connecticut Hospital Association Receipt For: Primary General Other (specify) Aggregate Year-to-Date Aggregate Year-to-Date Date of Receipt M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y		FEC ID number of contributing		06320-4451	
Tull Name (Last, First, Middle Initial) Ms Laura J. Hanten Jordan Mailing Address 49 Oxford St City Hartford CT O6105-2915 FEC ID number of contributing federal political committee. Name of Employer Connecticut Hospital Association Receipt For: Primary General Other (specify) ▼ 350.00 Date of Receipt Transaction ID: 18687460 Amount of Each Receipt this Period 500.00 Amount of Each Receipt this Period 500.00		tal Receipt For:	Vice Pre	sident, Development	
Ms Laura J. Hanten Jordan Mailing Address 49 Oxford St City State Zip Code Hartford CT 06105-2915 FEC ID number of contributing federal political committee. Name of Employer Connecticut Hospital Association Receipt For: Primary General Other (specify) ▼ Date of Receipt Transaction ID: 18687460 Amount of Each Receipt this Period Foo.00		H ' -		350.00]
City State Zip Code CT 06105-2915 FEC ID number of contributing federal political committee. C State Zip Code Transaction ID: 18687460 Amount of Each Receipt this Period C State Zip Code CT 06105-2915 Amount of Each Receipt this Period C State Zip Code Transaction ID: 18687460 Amount of Each Receipt this Period Feculation VP, Patient Care Care Aggregate Year-to-Date ✓ Aggregate Year-to-Date ✓ C State Zip Code Transaction ID: 18687460 Amount of Each Receipt this Period Footnote Transaction ID: 18687460 Amount of Each Receipt this Period Footnote Transaction ID: 18687460 Amount of Each Receipt this Period Footnote Transaction ID: 18687460 Amount of Each Receipt this Period Footnote Transaction ID: 18687460 Amount of Each Receipt this Period Footnote Transaction ID: 18687460 Amount of Each Receipt this Period Footnote Transaction ID: 18687460 Amount of Each Receipt this Period Footnote Transaction ID: 18687460 Amount of Each Receipt this Period Footnote Transaction ID: 18687460 Amount of Each Receipt this Period Footnote Transaction ID: 18687460 Amount of Each Receipt this Period Footnote Transaction ID: 18687460 Amount of Each Receipt this Period Footnote Transaction ID: 18687460 Amount of Each Receipt this Period Footnote Transaction ID: 18687460		Ms Laura J. Hanten Jordan			M M / D D / Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Connecticut Hospital Association Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1250.00		City	State	Zip Code	
Name of Employer Connecticut Hospital Association Receipt For: Primary Other (specify) ▼ Occupation VP, Patient Care Aggregate Year-to-Date 500.00		<u>Hartford</u>	СТ	06105-2915	Amount of Each Receipt this Period
ciation Receipt For: Primary Other (specify) ▼ Aggregate Year-to-Date Solution Aggregate Year-to-Date Aggregate Year-to-Date Aggregate Year-to-Date			С		500.00
Primary General Other (specify) ▼ 500.00		ciation	VP, Patie	ent Care	
SUBTOTAL of Receipts This Page (optional)		Primary General	Aggregate]
		SUBTOTAL of Receipts This Page (optional)			1350.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports	and Statements may not be sold or used by any persong the name and address of any political committee	son for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association P.		to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Stephen A. Frayne		Date of Receipt
Mailing Address 411 Old Sherman	Hill Road	10 21 2010
City Woodbury	State Zip Code CT 06798-4003	Transaction ID: 18687462 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Connecticut Hospital Asso- ciation	Occupation Senior Vice President, Health Policy	,
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Patrick Charmel		Date of Receipt
Mailing Address 130 Division Stre	et	10 21 7 2010
City Derby	State Zip Code CT 06418-1326	Transaction ID: 18687558 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer Griffin Hospital	Occupation President and Chief Executive Office	er
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Kimberley K. Hostetler	L	Date of Receipt
Mailing Address 31 Prospect Place	9	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Bristol	State Zip Code CT 06010-5045	Transaction ID: 18687559
FEC ID number of contributing federal political committee.	C 00010-5045	Amount of Each Receipt this Period 500.00
Name of Employer Connecticut Hospital Asso- ciation	Occupation Vice President Administration and C	Comm
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
	nal)	1500.00

SCHEDULE A (FEC		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 261 (check only one) X 11a 11b 11c 12
Any information copied from su or for commercial purposes, ot NAME OF COMMITTEE (II American Hospital Ass	n Full)	y not be sold or used by any persondress of any political committee to	n for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Midd Ms Kyle Ballou Mailing Address 20 York	lle Initial)	Zip Code	Date of Receipt 10 21 2010 Transaction ID: 18687560
New Haven FEC ID number of contributed federal political committee.	СТ	06510-3220	Amount of Each Receipt this Period 250.00
Name of Employer Yale-New Haven Hospital Receipt For: Primary Ger Other (specify) ▼	 	trative Director Community & e Year-to-Date 250.00	k Go
Full Name (Last, First, Midd Ms. Marna P Borgstrom Mailing Address 20 York			Date of Receipt 1 0 2 1 2 0 1 0
City	State	Zip Code	Transaction ID: 18687561
New Haven	CT	06510-3220	Amount of Each Receipt this Period
FEC ID number of contributed federal political committee.	C		1000.00
Name of Employer Yale-New Haven Hospital		t and Chief Executive Office	r
Receipt For: Primary Ger Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
Full Name (Last, First, Midd Mr. Kurt A Barwis, , FACHE Mailing Address P O Bo	· 		Date of Receipt
City	State	Zip Code	Transaction ID: 18687562
Bristol FEC ID number of contribut federal political committee.	CT C	06011-0977	Amount of Each Receipt this Period 500.00
Name of Employer Bristol Hospital	Occupation Presiden	n it and Chief Executive Office	r
Receipt For: Primary Ger Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This	Page (optional)		1750.00
TOTAL This Period (last page	e this line number only)		

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 11
A	ny information copied from such Reports and S r for commercial purposes, other than using the	itatements may not be sold or used by any person name and address of any political committee to s	for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Mr. James D. lacobellis		Date of Receipt
	Mailing Address 110 Barnes Road		10 21 2010
	City Wallingford	State Zip Code CT 06492-1802	Transaction ID: 18687577
	FEC ID number of contributing federal political committee.	C1 00492-1802	Amount of Each Receipt this Period 500.00
	Name of Employer Connecticut Hospital Asso- ciation	Occupation Vice President, Government Relations	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) Mr. Martin J. Gavin		Date of Receipt
	Mailing Address 108 Winding Lane		1 0 2 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 18687578
	Avon	CT 06001-2625	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	350.00
	Name of Employer Connecticut Children's Me- dical Center	Occupation President & CEO	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 350.00	
	Full Name (Last, First, Middle Initial) Ms. Carolyn S. Kobsa	L	Date of Receipt
	Mailing Address P O Box 5000		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 18687579
	Bridgeport	CT 06610-0120	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	350.00
	Name of Employer Bridgeport Hospital	Occupation Senior Vice President Planning and Ma	ar
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
		·····	1200.00

or fo	information copied from such Reports and Strommercial purposes, other than using the RAME OF COMMITTEE (In Full) American Hospital Association PAC ull Name (Last, First, Middle Initial) br. Peter N Herbert, , M.D. dailing Address 789 Howard Avenue sity New Haven EC ID number of contributing ederal political committee. lame of Employer ale New Haven Health Sys-	Statements may not be sold or used by any person e name and address of any political committee to s State Zip Code CT 06519-1304	Date of Receipt Date of Receipt Transaction ID: 18687580
F F F F F F F F F F F F F F F F F F F	American Hospital Association PAC ull Name (Last, First, Middle Initial) br. Peter N Herbert, , M.D. dailing Address 789 Howard Avenue sity New Haven EC ID number of contributing ederal political committee.	CT 06519-1304	Transaction ID: 18687580 Amount of Each Receipt this Period
. D N C D F	or. Peter N Herbert, , M.D. Italiang Address 789 Howard Avenue	CT 06519-1304	Transaction ID: 18687580 Amount of Each Receipt this Period
F fe	lew Haven EC ID number of contributing ederal political committee.	CT 06519-1304	Transaction ID: 18687580 Amount of Each Receipt this Period
<u>N</u> F fe N Y	New Haven EC ID number of contributing ederal political committee.	CT 06519-1304	Amount of Each Receipt this Period
F fe	EC ID number of contributing ederal political committee.		
	lame of Employer 'ale New Haven Health Sys-		
	em leceipt For: Primary General Other (specify)	Occupation Senior Vice President Medical Affairs Aggregate Year-to-Date ▼ 500.00	
8. <u>N</u>	ull Name (Last, First, Middle Initial) 1s. Lucille A Janatka 1ailing Address 435 Lewis Avenue		Date of Receipt
_			10 21 2010
	ity Neriden	State Zip Code CT 06451-2101	Transaction ID: 18687585 Amount of Each Receipt this Period
F	EC ID number of contributing ederal political committee.	C	500.00
N N	lame of Employer lidState Medical Center	Occupation President and Chief Executive Officer	
R	eceipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
	ull Name (Last, First, Middle Initial) rr. Susan L Davis, , R.N., Ed		Date of Receipt
N	failing Address 2800 Main Street		10 21 2010
	ity	State Zip Code	Transaction ID: 18687586
F	Bridgeport EC ID number of contributing ederal political committee.	CT 06606-4201	Amount of Each Receipt this Period 500.00
	lame of Employer tt. Vincent's Medical Cen- er	Occupation President and Chief Executive Officer	
R	deceipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUE	BTOTAL of Receipts This Page (optional)		1500.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS Any information copied from such Benorts an	Use separate schedule(s) for each category of the Detailed Summary Page d Statements may not be sold or used by any person	FOR LINE NUMBER: PAGE 20 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 11 for the purpose of soliciting contributions
or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	the name and address of any political committee to s	olicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. John J. Brady, III Mailing Address 5 Lynnbrook Road		Date of Receipt
		10 21 2010
City Trumbull	State Zip Code CT 06611-3308	Transaction ID: 18687588
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 500.00
Name of Employer Connecticut Hospital Asso- ciation	Occupation Vice President, Business Development	& &
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Allan Pinard	1	Date of Receipt
Mailing Address 110 Barnes Road		M M / D D / Y Y Y Y Y Y 1 1 0 2 1 2 0 1 0
City	State Zip Code	Transaction ID: 18687591
Wallingford	CT 06492-1802	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Connecticut Hospital Asso- ciation	Occupation Assistant Vice President, Finance	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. John H Tobin		Date of Receipt
Mailing Address 64 Robbins Street		10 21 2010
City	State Zip Code	Transaction ID: 18687592
Waterbury	CT 06708-2600	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Waterbury Hospital	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional	l) >	1350.00

SCHEDULE A (FEC Form 3X)	0303	separate schedule(s)	FOR LINE NUMBER: PAGE 21 / 261 (check only one)
ITEMIZED RECEIPTS		ch category of the ed Summary Page	X 11a
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be some name and address of a	old or used by any persor any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) A. Ms. Jennifer D. Jackson			Date of Receipt
Mailing Address 61 Hickory Lane			M M / D D / Y Y Y Y Y 1 Y 1 1 0 2 1 2 0 1 0
City	State Zip	Code	Transaction ID: 18687602
Madison	CT 064	43-1718	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Connecticut Hospital Asso- ciation Receipt For:	Occupation President and Cl Aggregate Year-to-	nief Executive Officer	
Primary General Other (specify) ▼		1000.00	
Full Name (Last, First, Middle Initial) B. Mr. Kevin Reynolds			Date of Receipt
Mailing Address 280 Steele Road			10 21 2010
City	State Zip	Code	Transaction ID: 18687610
West Hartford	CT 061	17-2743	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Saint Francis Care, Inc.	Occupation Trustee		
Receipt For:	Aggregate Year-to-	Date ▼	
Primary General Other (specify) ▼		250.00	
Full Name (Last, First, Middle Initial) C. Mr. Robert J. Falaguerra			Date of Receipt
Mailing Address 114 Woodland Street	:		10 21 2010
City	State Zip	Code	Transaction ID: 18687612
<u>Hartford</u>	CT 061	05-1208	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Saint Francis Hospital and Medical Cen	Occupation Vice President P	lant Operation]
Receipt For: Primary General Other (specify)	Aggregate Year-to-	Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		·····	1500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 261 (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAG			
Full Name (Last, First, Middle Initial) Mr. Bernard A. Clark, III			Date of Receipt
Mailing Address 93 Johnny Cake La	ne		10 21 2010
City Glastonbury	State CT	Zip Code 06033-2545	Transaction ID: 18687618
FEC ID number of contributing federal political committee.	C	00035-2545	Amount of Each Receipt this Period 250.00
Name of Employer Saint Francis Hospital and Medical Cen Receipt For: Primary General Other (specify) ▼		n, Dept. of Medicine e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms Teresa Bolton Mailing Address 37 Candlewood Dr			Date of Receipt
City	State	Zip Code	1 0 2 1 2 0 1 0 Transaction ID: 18687622
West Hartford	CT	06117-1010	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Saint Francis Hospital and Medical Cen	Occupatio Vice Pres	n sident Legal Affairs	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		250.00	
Full Name (Last, First, Middle Initial) Mr. James W. Schepker			Date of Receipt
Mailing Address 115 Mountain Terra	ace Road		10 21 2010
City	State	Zip Code	Transaction ID: 18687630
West Hartford	CT	06107-1547	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Saint Francis Hospital and Medical Cen Receipt For:		sident, Communications	
Primary General	Aggregate	e Year-to-Date	1
Other (specify)		250.00	
SUBTOTAL of Receipts This Page (optional	I)		750.00

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C.

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 23 / 261
ITEMIZED RECEIPTS		for each category of the	(check only one)
ITEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
		., .,	13 14 15 16 17
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may name and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. R. Christopher Hartley			Date of Receipt
Mailing Address 114 Woodland Street			10 21 2010
City	State	Zip Code	Transaction ID: 18687635
Hartford	CT	06105-1208	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer	Occupation	n	7
Saint Francis Hospital and Medical Cen	Senior V	ice President Planning and F	a¢
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General			1
Other (specify)		500.00	
Full Name (Last, First, Middle Initial) Mr. Edward Johnson			Date of Receipt
Mailing Address 114 Woodland Street			10 21 2010
City	State	Zip Code	Transaction ID: 18687835
<u>Hartford</u>	CT	06105-1208	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Saint Francis Hospital and Medical Cen	Occupation Senior Vi	n ice President	
Receipt For:	Aggregate	e Year-to-Date ▼	7
Primary General	133.13		1
Other (specify) ▼		500.00	
Full Name (Last, First, Middle Initial) Ms. Mary Ann Hanley			Date of Receipt
Mailing Address 349 East Street			10 21 YYYY 2010
City	State	Zip Code	Transaction ID: 18687840
Hebron	CT	06248-1102	Amount of Each Receipt this Period
FEC ID number of contributing			
federal political committee.	C		250.00
Name of Employer Saint Francis Hospital and	Occupation	n	7
Medical Cen	Administ	rative Liaison	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General		250.00	
Other (specify) ▼		230.00	
SUBTOTAL of Receipts This Page (optional)			1250.00

TOTAL This Period (last page this line number only)

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SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using to	d Statements may not be sold or used by any persible name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr Gregory T Makoul		Date of Receipt
Mailing Address 49 Madison Ave	Chair 7'- Cada	10 21 2010
City Madison	State Zip Code CT 06443-3135	Transaction ID: 18687844 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Saint Francis Hospital and Medical Cen Receipt For: Primary General Other (specify) ▼	Occupation Sr. Vice President Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Howard A. Shaw, MD Mailing Address 65 Olander Lane		Date of Receipt
City	State Zip Code	10 21 2010
Middletown	CT 06457-1574	Transaction ID: 18687846 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Saint Francis Hospital and Medical Cen	Occupation Chairman & Director, Department C	DB/GYN
Receipt For: Primary General Other (specify) ♥	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms Nicole J Schulz		Date of Receipt
Mailing Address 142 Four Mile Rd		10 21 2010
City	State Zip Code	Transaction ID: 18687928
West Hartford	CT 06107-3021	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Saint Francis Hospital and Medical Cen	Occupation VP Revenue Cycle	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
		750.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page d Statements may not be sold or used by any person	FOR LINE NUMBER: PAGE 25 / 261 (check only one) X 11a
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	the name and address of any political committee to s	colicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr Daniel J Diver, M.D. Mailing Address 2 Whitehall Place	Chata 7io Cada	Date of Receipt 1 0 2 1 2 0 1 0
City Farmington FEC ID number of contributing federal political committee.	State Zip Code CT 06032-1455	Transaction ID: 18687938 Amount of Each Receipt this Period 250.00
Name of Employer Saint Francis Hospital and Medical Cen Receipt For: Primary General Other (specify) ▼	Occupation Director Hoffman Heart and Vascular I Aggregate Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) Ms. Kathleen Roche Mailing Address 114 Woodland Stree	et	Date of Receipt
City Hartford FEC ID number of contributing federal political committee.	State Zip Code CT 06105-1208 C	Amount of Each Receipt this Period 250.00
Name of Employer Saint Francis Hospital and Medical Cen Receipt For: Primary General Other (specify) ▼	Occupation Executive Vice President&COO Aggregate Year-to-Date 250.00	_
Full Name (Last, First, Middle Initial) Mr. Jeffrey Steinberg Mailing Address 114 Woodland Street	et	Date of Receipt 10 21 2010
City Hartford FEC ID number of contributing	State Zip Code CT 06105-1208	Transaction ID: 18687945 Amount of Each Receipt this Period 250.00
Receipt For: Primary Other (specify) General Other (specify) Primary General	Occupation Chairman of Surgery Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional))	750.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 261 (check only one) X 11a 11b 11c 12 12 13 14 15 16
Any information copied from such Reports and St or for commercial purposes, other than using the	tatements may not be sold or used by any person name and address of any political committee to s	for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAC	,,	
Full Name (Last, First, Middle Initial) Ms. Jennifer Schneider		Date of Receipt
Mailing Address 17 Candlewood Lane		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18687952
Granby	CT 06035-1127	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Saint Francis Hospital and Medical Cen	Occupation VP, Lean & Contributions Improvemen	- ht
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr. Stuart E. Rosenberg		Date of Receipt
Mailing Address 289 Hill St		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18687953
Bristol	CT 06010-2955	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	275.00
Name of Employer Saint Francis Hospital and Medical Cen	Occupation Executive Director- North Campus	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	
Full Name (Last, First, Middle Initial) Mr. Donald Straceski		Date of Receipt
Mailing Address 114 Woodland Street		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18687954
Hartford	CT 06105-1208	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Saint Francis Hospital and Medical Cen	Occupation Vice President Fiancial Management	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	_	775.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 261 (check only one) X 11a
A 0	ny information copied from such Reports and strong commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may e name and ado	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American Hospital Association PAC			
۸.	Full Name (Last, First, Middle Initial) Ms. Jess Kupec			Date of Receipt
	Mailing Address 8 Ellridge Place	Ctata	7in Code	10 21 2010
	City Ellington	State CT	Zip Code 06029-3633	Transaction ID: 18687959 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00020 0000	250.00
	Name of Employer Saint Francis Hospital and Medical Cen	Occupation President	n t and CEO	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
- 3.	Full Name (Last, First, Middle Initial) Mr. Joseph White, III			Date of Receipt
	Mailing Address 10 Lakeside Terrace			10 21 2010
	City	State	Zip Code	Transaction ID: 18687960
	Westford	MA	01886-1392	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Lowell General Hospital	Occupation Executive	n e Vice President & COO	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	_
	Other (specify) ▼		500.00	
. –	Full Name (Last, First, Middle Initial) Mr. Paul R Bengtson			Date of Receipt
	Mailing Address P O Box 905			10 21 2010
	City	State	Zip Code	Transaction ID: 18694330
	Saint Johnsbury FEC ID number of contributing federal political committee.	C	05819-9962	Amount of Each Receipt this Period 350.00
	Name of Employer Northeastern Vermont Regi-	Occupation	ecutive Officer	
	onal Hospital Receipt For: Primary General Other (specify) ▼	- '	Year-to-Date ▼ 350.00	
				1100.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Κ)	Use separate schedule(s) for each category of the Detailed Summary Page	Check only one) X 11a
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAG	<u> </u>		
Full Name (Last, First, Middle Initial) Ms. Jill Berry Bowen			Date of Receipt
Mailing Address PO Box 445			M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
City Saint Albans	State VT	Zip Code 05478-0445	Transaction ID: 18694331 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	03470-0443	350.00
Name of Employer Northwestern Medical Cent-	Occupation Chief Exe	n ecutive Officer	
Receipt For: Primary General Other (specify)		Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Kevin Donovan, FACHE			Date of Receipt
Mailing Address 512 Brookside Dr			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City New Landon	State NH	Zip Code	Transaction ID: 18694332
New London FEC ID number of contributing federal political committee.	C	03257-5858	Amount of Each Receipt this Period 350.00
Name of Employer Mt. Ascutney Hospital and Health Cente	Occupation	n	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Dr. Melinda Estes, , M.D.			Date of Receipt
Mailing Address 111 Colchester Ave	enue		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 18694334
Burlington FEC ID number of contributing federal political committee.	C	05401-1473	Amount of Each Receipt this Period 1000.00
Name of Employer Fletcher Allen Health Care	Occupation President	n t and Chief Executive Officer	-
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 1000.00	
	l		1700.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee to s	for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Marie Beatrice Grause, RN, JD Mailing Address 1580 North Street		Date of Receipt
City	State Zip Code	1 0 2 1 2 0 1 0 Transaction ID: 18694335
<u>Montpelier</u>	VT 05602-2997	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Vermont Association of Ho- spitals & Hea	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Ms Lori Brown		Date of Receipt
Mailing Address 40349 Braddock Rd		10 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18695237
<u>Aldie</u>	VA 20105-2719	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Inova Health System	Occupation Assistant Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr Ben Clark		Date of Receipt
Mailing Address 810 Green Acres RD		10 22 2010
City	State Zip Code	Transaction ID: 18695238
Evington	VA 24550	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Centra Lynchburg General Hospital	Occupation Vice President and Chief Information C	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	350.00	
SUBTOTAL of Receipts This Page (optional)		1700.00
TOTAL This Period (last page this line number	<u> </u>	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 261 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. James B Cole		Date of Receipt
Mailing Address 1701 North George	Mason Drive	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18695239
Arlington	VA 22205-3610	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Virginia Hospital Center - Arlington	Occupation Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial) Ms. Elizabeth Hudson		Date of Receipt
Mailing Address 8004 Greenwich Wo	oods Drive	10 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18695241
McLean	VA 22102-1332	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Inova Fairfax Hospital	Occupation Trustee	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial) Dr. David Levin		Date of Receipt
Mailing Address 1476 Bridge Point T	rail	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18695243
Suffolk	VA 23432-1320	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Sentara Healthcare	Occupation Vice President Medical Affairs	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
		1050.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 17
4	Any information copied from such Reports and St or for commercial purposes, other than using the	atements may not be sold or used by any perso name and address of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
↓ \ .	Full Name (Last, First, Middle Initial) Mr Dean Morehouse		Date of Receipt
	Mailing Address 8800 Pennsylvania Ave	3	10 22 2010
	City	State Zip Code	Transaction ID: 18695262
	Upper Marlboro	MD 20772-7312	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	350.00
	Name of Employer Inova Health System	Occupation Trustee	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
_ 3.	Full Name (Last, First, Middle Initial) Mr Shane H Peng, MD		Date of Receipt
	Mailing Address 9870 Breezy Pont Ln		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 18695264
	Hayes	VA 23072-4019	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	350.00
	Name of Employer Sentara Healthcare	Occupation VP Sr Medical Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
-).	Full Name (Last, First, Middle Initial) Ms. Patricia Schmehl		Date of Receipt
	Mailing Address 3221 Sargent Drive		10 22 2010
	City Falls Church	State Zip Code VA 22044-1614	Transaction ID: 18695265 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	350.00
	Name of Employer Inova Fairfax Hospital	Occupation Senior Director	7
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional)		1050.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any perse name and address of any political committee t	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. G. Robert Vaughan, Jr. Mailing Address 1839 Mt. Vernon Road City Roanoke FEC ID number of contributing federal political committee. Name of Employer Carilion Clinic	State Zip Code VA 24015-2906 C Occupation Vice President Finance	Date of Receipt 10 22 2010 Transaction ID: 18695268 Amount of Each Receipt this Period 350.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Glenn Zirbser Mailing Address 507 N Highland St		Date of Receipt 1 0 2 2 2 2 2 0 1 0
City	State Zip Code	Transaction ID: 18695699
Arlington	VA 22201-2037	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Inova Loudoun Hospital	Occupation Chief Financial Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Thomas A Kleinhanzl		Date of Receipt
Mailing Address 4306 Saratoga Spring	s Court	10 22 2010
City	State Zip Code	Transaction ID: 18695712
Middletown	MD 21769-8110	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	255.00
Name of Employer Frederick Memorial Hospit- al	Occupation President and Chief Executive Office	er
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	
		955.00

SCHEDULE A (FEC FOR ITEMIZED RECEIPTS Any information copied from such Rep	for each category of the Detailed Summary Page orts and Statements may not be sold or used by any person	FOR LINE NUMBER: PAGE 33 / 261 (check only one) X
or for commercial purposes, other than NAME OF COMMITTEE (In Full) American Hospital Associatio	using the name and address of any political committee to s	solicit contributions from such committee.
Full Name (Last, First, Middle Initia Mr. James J Xinis	, 	Date of Receipt
Mailing Address 8430 Meadow	view Circle	10 22 2010
City	State Zip Code	Transaction ID: 18695720
Owings	MD 20736-9502	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	391.00
Name of Employer Calvert Memorial Hospital	Occupation President and Chief Executive Officer]
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 391.00	
Full Name (Last, First, Middle Initia Mr. John O Wilhelm, Jr.		Date of Receipt
Mailing Address 85 Herrrick St		10 25 25 2010
City	State Zip Code	Transaction ID: 18696157
Beverly FEC ID number of contributing federal political committee.	MA 01915-1777	Amount of Each Receipt this Period 1000.00
Name of Employer Emerson Hospital	Occupation Executive Vice President & Chief Final	_ n
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initia Mr. Steve M. Ahnen		Date of Receipt
Mailing Address 125 Airport Ro	pad	10 25 2010
City	State Zip Code	Transaction ID: 18696192
Concord	NH 03301-7300	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.33
Name of Employer New Hampshire Hospital As- sociation	Occupation President and CEO]
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.02	
SUBTOTAL of Receipts This Page (optional)	1474.33

SCHEDULE A (FEC Form 3X)	Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 34 / 261 (check only one)
ITEMIZED RECEIPTS	Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Matthew Anderson, JD		Date of Receipt
Mailing Address 2550 University Avenu	ue W.	10 25 / Y Y Y Y
City	State Zip Code MN 55114-1052	Transaction ID: 18696200
Saint Paul FEC ID number of contributing	MN 55114-1052	Amount of Each Receipt this Period 134.61
federal political committee.		
Name of Employer Minnesota Hospital Associ- ation	Occupation Vice Pres, Regulatory/Strategic Affair	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	249.99	
Full Name (Last, First, Middle Initial) Mr. William Fenske		Date of Receipt
Mailing Address 301 S. Oak Avenue S	W	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18696202
Willamar	MN 56201	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer Rice Memorial Hospital	Occupation Chief Financial Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr. Roger E Green	I.	Date of Receipt
Mailing Address 559 Capitol Boulevard	I, 6-South	10 25 2010
City	State Zip Code	Transaction ID: 18696210
Saint Paul	MN 55103-0000	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.83
Name of Employer HealthEast Care System	Occupation Vice President Strategy, Policy and Co	0
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	229.15	
SUBTOTAL of Receipts This Page (optional)		205.44
SUBTOTAL of Receipts This Page (optional) . TOTAL This Period (last page this line number		200.44

SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 261 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using t	d Statements may	y not be sold or used by any perso	n for the purpose of soliciting contributions
	ine name and add	dress of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. Richard Kreyer			Date of Receipt
Mailing Address 2550 University Ave			10 25 7 2010
City	State	Zip Code	Transaction ID: 18696212
Saint Paul	MN	55114-1052	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		134.61
Name of Employer Minnesota Hospital Associ-	Occupation Vice Pres	n sident, Work Force	
ation Receipt For:		Year-to-Date ▼	_
Primary General Other (specify) ▼	7 iggi ogalo	249.99	
Full Name (Last, First, Middle Initial) Mr. Mark Sonneborn			Date of Receipt
Mailing Address 2550 University Ave	nue W.		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 18696215
Saint Paul	MN	55114-1052	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		140.00
Name of Employer Minnesota Hospital Associ- ation	Occupation Vice Pres	n sident of Information Service	es es
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 260.00	
Full Name (Last, First, Middle Initial) Ms. Peggy Westby			Date of Receipt
Mailing Address 2550 University Average Suite 350-S	nue W.		10 25 2010
City	State	Zip Code	Transaction ID: 18696217
Saint Paul	MN	55114-1052	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		134.61
Name of Employer Minnesota Hospital Associ- ation	Occupation Vice Pres		
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		249.99	
SUBTOTAL of Receipts This Page (optional)			409.22

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Kimber Wraalstad		Date of Receipt
Mailing Address 515 5th Avenue West		10 25 2010
City Grand Marais	State Zip Code MN 55604-3017	Transaction ID: 18696218 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 33004-3017	250.00
Name of Employer Cook County North Shore Hospital Receipt For: Primary General Other (specify) ▼	Occupation Administrator Aggregate Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) Mr. Mitchell C Carson Mailing Address P O Box 1659		Date of Receipt
0.1	Olate Zin Onde	10 25 2010
City Longmont	State Zip Code CO 80502-1659	Transaction ID: 18696874 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	11.25
Name of Employer Longmont United Hospital	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 261.25	
Full Name (Last, First, Middle Initial) Ms. Jodi Chambers		Date of Receipt
Mailing Address 4231 West 16th Aven	ue	10 25 2010
City	State Zip Code	Transaction ID: 18696879
Denver FEC ID number of contributing federal political committee.	CO 80204-1335	Amount of Each Receipt this Period 250.00
Name of Employer St. Anthony Central Hospi- tal	Occupation Chief Medical Officer	
Receipt For: Primary General	Aggregate Year-to-Date ▼ 250.00	
Other (specify) ▼		
SUBTOTAL of Receipts This Page (optional) .	·····	511.25
TOTAL This Period (last page this line number	r only)	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37 / 261 (check only one) X 11a
A	ny information copied from such Reports and Si for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sold or used by any pers name and address of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
<u>/</u> A.	Full Name (Last, First, Middle Initial) Mr. George Hayes Mailing Address 2500 Rocky Mountain	Avenue	Date of Receipt 1 0 2 5 2 0 1 0
	City Loveland	State Zip Code CO 80538-9004	Transaction ID: 18696880 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	45.00
	Name of Employer Medical Center of the Roc- kies Receipt For: Primary General Other (specify) ▼	Occupation CEO Aggregate Year-to-Date 220.00	
	Full Name (Last, First, Middle Initial) Mr. Gerald R. Sprong Mailing Address 1014 W. St. Maartens	Drive	Date of Receipt 1 0 0 2 7 2 0 1 0
	City	State Zip Code	Transaction ID: 18696907
	Saint Joseph FEC ID number of contributing federal political committee.	MO 64506-2988	Amount of Each Receipt this Period 250.00
	Name of Employer Heartland Health	Occupation Board Member	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
_	Full Name (Last, First, Middle Initial) Ms. Joanne Carrocino, , FACHE		Date of Receipt
	Mailing Address Two Stone Harbor Bou	levard	10 22 2010
	City Cape May Court Hou	State Zip Code NJ 08210-2138	Transaction ID: 18696952 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Cape Regional Medical Cen- ter	Occupation President and Chief Executive Office	er
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Γ,	SUBTOTAL of Receipts This Page (optional)		795.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 261 (check only one) X 11a 11b 11c 12 15 16
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may not be sold or used by any persor name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Ronald J Del Mauro		Date of Receipt
Mailing Address 50 Sherwood Drive		10 22 2010
City	State Zip Code	Transaction ID: 18696958
Watchung	NJ 07069-6136	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Saint Barnabas Health Care	Occupation	7
<u>System</u>	President and Chief Executive Officer	_
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. John A Fromhold	<u> </u>	Date of Receipt
Mailing Address 9437 Smithson Lane		M M / D D / Y Y Y Y Y Y 1 0 2 2 2 0 1 0
City	State Zip Code	Transaction ID: 18696964
Brentwood	TN 37027-8741	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Mountainside Hospital	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. John T Gribbin, , FACHE		Date of Receipt
Mailing Address 5 Ephriam Road		1 0 2 2 2 2 0 1 0
City	State Zip Code	Transaction ID: 18696969
Clarksburg	NJ 08510-1620	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer CentraState Healthcare Sy- stem	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)	>	1500.00

TOTAL This Period (last page this line number only)

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 39 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Si or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
A .	Full Name (Last, First, Middle Initial) Mr. Fred Hipp, Jr. Mailing Address 1011 Deacon Road City Hainesport FEC ID number of contributing federal political committee. Name of Employer Virtua Health	State NJ C Occupation Vice Pres	sident	Date of Receipt 10 22 2010 Transaction ID: 18696971 Amount of Each Receipt this Period 500.00
_	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
В.	Full Name (Last, First, Middle Initial) Mr. Sean J. Hopkins Mailing Address 6180 Lower Mountain I	Road		Date of Receipt 1 0 2 2 2 2 2 0 1 0
	City	State	Zip Code	Transaction ID: 18696972
	New Hope	PA	18938	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		329.57
	Name of Employer New Jersey Hospital Assoc-	Occupation	n Health Economics	
	iation Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 608.35	
- C.	Full Name (Last, First, Middle Initial) Mr. Al Maghazehe			Date of Receipt
	Mailing Address 314 Stoney Ford Road			10 22 YYYY 2010
	City	State	Zip Code	Transaction ID: 18696983
	Holland	PA	18966-2510	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1369.00
	Name of Employer Capital Health		ecutive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1369.00	
	SUBTOTAL of Receipts This Page (optional)			2198.57
	TOTAL This Period (last page this line number of	only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 / 261 (check only one) X 11a
Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any perse name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. John P McGee Mailing Address 60 Old Mill Road City Holmdel FEC ID number of contributing federal political committee. Name of Employer Solaris Health System	State Zip Code NJ 07733-2315 C Occupation President and Chief Executive Office	Date of Receipt 10 22 2 2010 Transaction ID: 18696987 Amount of Each Receipt this Period 500.00
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Audrey Meyers Mailing Address 223 North Van Dien A	venue	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18696989
Ridgewood FEC ID number of contributing federal political committee.	NJ 07450-2726	Amount of Each Receipt this Period 500.00
Name of Employer Valley Hospital Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation President and Chief Executive Office Aggregate Year-to-Date 1000.00	
Full Name (Last, First, Middle Initial) Mr. Mark D Pilla		Date of Receipt
Mailing Address 99 Route 37 West		10 / 22 / Y Y Y Y
City Toms River	State Zip Code NJ 08755-6423	Transaction ID: 18696997
Toms River FEC ID number of contributing federal political committee.	NJ 08755-6423	Amount of Each Receipt this Period 250.00
Name of Employer Saint Barnabas Health Care System Receipt For: ☐ Primary ☐ General Other (specify) ▼	Occupation Executive Director Aggregate Year-to-Date 250.00	
SUBTOTAL of Receipts This Page (optional) .	1	1250.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using	d Statements may not be sold or used by any persor the name and address of any political committee to	n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Elizabeth A. Ryan, Esq.		Date of Receipt
Mailing Address 4 Brookside Drive		10 22 2010
City	State Zip Code	Transaction ID: 18697001
Bordentown	NJ 08505-4439	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer New Jersey Hospital Assoc- iation	Occupation President & Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	
Full Name (Last, First, Middle Initial) Mr. David P Tilton		Date of Receipt
Mailing Address 624 Park Place		10 22 2010
City	State Zip Code	Transaction ID: 18697008
Galloway	NJ 08205-6014	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer AtlantiCare	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Mr. Claudio Fort		Date of Receipt
Mailing Address 189 Prouty Drive		10 29 2010
City Newport	State Zip Code VT 05855-9326	Transaction ID: 18697148 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer North Country Hospital and Health Cent	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)	1350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 42 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than usin	and Statements may not be sold or used by any perso g the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PA	AC .	
Full Name (Last, First, Middle Initial) Ms. Anne E. Cramer Mailing Address 450 B. J. J. J. B.		Date of Receipt
Mailing Address 153 Packard Roac		10 29 2010
City Jericho	State Zip Code VT 05465-2025	Transaction ID: 18700901 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Vermont Association of Ho- spitals & Hea	Occupation Legal Counsel VTHA	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Ms. Judith C Tarr		Date of Receipt
Mailing Address P O Box 547		10 29 2010
City	State Zip Code	Transaction ID: 18700905
Barre	VT 05641-0547	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Central Vermont Medical Center	Occupation President and Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	_
Primary General Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial) Mr James Staten		Date of Receipt
Mailing Address 20 York Street		10 29 YYYY 2010
City	State Zip Code	Transaction ID: 18700961
New Haven FEC ID number of contributing federal political committee.	CT 06510-3220	Amount of Each Receipt this Period 350.00
Name of Employer Yale-New Haven Hospital	Occupation Senior Vice President Finance	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (option	al)	1050.00
	mber only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 43 / 261 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements mage name and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Robert E Smanik, , FACHE Mailing Address P O Box 6001			Date of Receipt
City Putnam FEC ID number of contributing federal political committee.	State CT	Zip Code 06260-0901	Transaction ID: 18700964 Amount of Each Receipt this Period 500.00
Name of Employer Day Kimball Hospital Receipt For: Primary General Other (specify) ▼	- '	n It and Chief Executive Officer e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Frank R. Brownell, III Mailing Address Post Office Box 76 100 North 10th Street City	State	Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Montezuma FEC ID number of contributing federal political committee. Name of Employer Grinnell Regional Medical Center Receipt For: Primary General Other (specify)	Occupation Trustee Aggregate	50171-0076 n e Year-to-Date ▼ 750.00	Amount of Each Receipt this Period 750.00
Full Name (Last, First, Middle Initial) Mr. Peter W Thoreen, , FACHE Mailing Address 2720 Stone Park Boul	evard		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City Sioux City FEC ID number of contributing federal political committee. Name of Employer St. Luke's Regional Medical Center Receipt For: Primary General	+ +	Zip Code 51104-3795 n tt and Chief Executive Officer e Year-to-Date ▼ 750.00	Transaction ID: 18700997 Amount of Each Receipt this Period 750.00
Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)		0 0 0 0 0 0 0	2000.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 44 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. J. Kirk Norris Mailing Address 5055 Upper Creek D)rive	Date of Receipt
City	State Zip Code	1 0 2 6 2 0 1 0 Transaction ID: 18700998
Pleasant Hill	IA 50327	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	750.00
Name of Employer lowa Hospital Association	Occupation President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	750.00	
Full Name (Last, First, Middle Initial) Mr. John E Knox, , FACHE		Date of Receipt
Mailing Address 350 North Grandvie		10 26 2010
City	State Zip Code	Transaction ID: 18700999
<u>Dubuque</u>	IA 52001-6392	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	550.00
Name of Employer Finley Hospital	Occupation President and Chief Executive Officer	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	550.00	
Full Name (Last, First, Middle Initial) Mr. William B Leaver	•	Date of Receipt
Mailing Address 1200 Pleasant Stree		10 26 7 2010
City	State Zip Code IA 50309-1406	Transaction ID: 18701000
Des Moines FEC ID number of contributing		Amount of Each Receipt this Period
federal political committee.	C	550.00
Name of Employer Iowa Health System	Occupation President and Chief Executive Officer	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	550.00	
SUBTOTAL of Receipts This Page (optional)	1850.00
TOTAL This Period (last page this line numb	per only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 45 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using the	statements may not be sold or used by any persor name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Theodore E Townsend Mailing Address P O Box 3026		Date of Receipt
City	State Zip Code	1 0 2 6 2 0 1 0 Transaction ID: 18701027
Cedar Rapids	IA 52406-3026	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	550.00
Name of Employer St. Luke's Hospital	Occupation President and Chief Executive Officer	_
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) Mr. Russell M Knight		Date of Receipt
Mailing Address 1111 Third Street SW		10 26 2010
City	State Zip Code	Transaction ID: 18701028
Dyersville	IA 52040-1725	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Mercy Medical Center-Dyer- sville	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ♥	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Dale Andres, D.O.		Date of Receipt
Mailing Address 3647 North Shore		10 26 2010
City <u>Clear Lake</u>	State Zip Code IA 50428-1070	Transaction ID: 18701029
FEC ID number of contributing federal political committee.	C 50428-1070	Amount of Each Receipt this Period 500.00
Name of Employer Mercy Medical Center-North	Occupation Senior Vice President Physician Integr	
lowa Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)	·······	1550.00
TOTAL This Period (last page this line number		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 46 / 261 (check only one) X 11a 11b 11c 12
		Detailed Summary Page	13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. Richard A Seidler, , FACHE			Date of Receipt
Mailing Address 1825 Logan Avenue			10 26 2010
City	State	Zip Code	Transaction ID: 18701030
<u>Waterloo</u>	IA	50703-1916	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Allen Memorial Hospital	Occupation President	n t and Chief Executive Office	_ r
Receipt For:	_ '	Year-to-Date ▼	
Primary General Other (specify) ▼		500.00	
Full Name (Last, First, Middle Initial) Dr. Larry W Sellers, , M.D.			Date of Receipt
Mailing Address P O Box 3168			10 26 2010
City	State	Zip Code	Transaction ID: 18701031
Sioux City	IA	51102-3168	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Mercy Medical Center-Sioux City	Occupation Chief Me	n dical Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. David H Vellinga, , FACHE			Date of Receipt
Mailing Address 1111 6th Avenue			10 26 7 2010
City	State	Zip Code	Transaction ID: 18701051
Des Moines	<u>IA</u>	50314-2613	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Mercy Medical Center-Des Moines	Occupation President	n t and Chief Executive Office	r
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		500.00]
SUBTOTAL of Receipts This Page (optional)			1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 47 / 261 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American Hospital Association PAC	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Dr. Thomas C Evans, M.D. Mailing Address 1200 Pleasant Stree	et		Date of Receipt 1 0 2 6 2 0 1 0
City Des Moines FEC ID number of contributing federal political committee.	State IA	Zip Code 50309-1453	Transaction ID: 18701052 Amount of Each Receipt this Period 500.00
Name of Employer Iowa Health System Receipt For: Primary General Other (specify) ▼	Occupatio Vice Pres	n sident and Chief Medical Offi e Year-to-Date ▼ 500.00	ic
Full Name (Last, First, Middle Initial) Ms. Shannon Strickler Mailing Address 1403 66th Street			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City Windsor Heights FEC ID number of contributing federal political committee.	State IA	Zip Code 50324-1722	Transaction ID: 18701053 Amount of Each Receipt this Period 500.00
Name of Employer lowa Hospital Association Receipt For: □ Primary □ General □ Other (specify) ▼	- ' '	Government Relations Year-to-Date 500.00	
Full Name (Last, First, Middle Initial) Mr. John C Sheehan Mailing Address P O Box 3026			Date of Receipt 1 0 2 6 2 0 1 0
City Cedar Rapids FEC ID number of contributing federal political committee.	State IA	Zip Code 52406-3026	Transaction ID: 18701054 Amount of Each Receipt this Period 500.00
Name of Employer St. Luke's Hospital Receipt For: Primary General Other (specify) ▼		e Vice President and COO e Year-to-Date 500.00	
SUBTOTAL of Receipts This Page (optional))	·····	1500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 48 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Timothy L Charles Mailing Address 701 Tenth Street SE City Cedar Rapids FEC ID number of contributing federal political committee. Name of Employer Mercy Medical Center Receipt For: Primary General	State Zip Code IA 52403-1251 C Occupation President and Chief Executive Officer Aggregate Year-to-Date	Date of Receipt M M M / 26 2010 Transaction ID: 18701055 Amount of Each Receipt this Period 500.00
Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Suku Radia Mailing Address 4800 Stonebridge Circ City West Des Moines FEC ID number of contributing federal political committee.	State Zip Code IA 50265-2982	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Mercy Medical Center Receipt For: Primary Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Gary S. Kahn	Occupation Chief Financial Officer Aggregate Year-to-Date ▼ 500.00	Date of Receipt
Mailing Address 1104 S. 5th Ave. W. City Newton FEC ID number of contributing federal political committee. Name of Employer Skiff Medical Center Receipt For: Primary General	State Zip Code IA 50208-3511 C Occupation Trustee Aggregate Year-to-Date ▼	Transaction ID: 18701066 Amount of Each Receipt this Period 500.00
Other (specify) SUBTOTAL of Receipts This Page (optional)	500.00	1500.00

ITEMIZED RECEIP	TS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a
Any information copied from sor for commercial purposes, of NAME OF COMMITTEE American Hospital As	other than using the name and a (In Full)	ay not be sold or used by any perso ddress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
Full Name (Last, First, Mid Mr. Douglas P Cropper Mailing Address 1227	East Rusholme Street		Date of Receipt M M A A D D A A D A D A D A D A D A D A
City	State	Zip Code	Transaction ID: 18701067
Davenport FEC ID number of contrib federal political committee		52803-2459	Amount of Each Receipt this Period 500.00
Name of Employer Genesis Health System Receipt For: Primary Other (specify) ▼		xecutive Officer te Year-to-Date ▼ 500.00	
Full Name (Last, First, Mid Mr. James G FitzPatrick, , F Mailing Address 1000 l	ACHE		Date of Receipt 10 26 2010
City	State	Zip Code	Transaction ID: 18701068
Mason City	IA	50401-2800	Amount of Each Receipt this Period
FEC ID number of contrib federal political committee	uting		500.00
Name of Employer Mercy Medical Center-No lowa Receipt For: Primary Gi	Preside	nt and Chief Executive Office te Year-to-Date ▼	r
Other (specify) ▼		500.00	
Full Name (Last, First, Mid Mr. Dennis A. White	ddle Initial)		Date of Receipt
Suite			10 26 7 2010
City	State IA	Zip Code	Transaction ID: 18701069
Des Moines FEC ID number of contrib federal political committee	uting	50309-1835	Amount of Each Receipt this Period 500.00
Name of Employer lowa Hospital Association	Occupati Senior V	ion Vice President	
Receipt For: Primary Ge Other (specify) ▼		te Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts Th	s Page (optional)	_	1500.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for ea	separate schedule(s) ach category of the led Summary Page	FOR LINE NUMBER: PAGE 50 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be s name and address of a	sold or used by any perso any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Α.	Full Name (Last, First, Middle Initial) Ms. Rebecca J. Anthony			Date of Receipt
	Mailing Address 100 East Grand Avenu Suite 100	e		10 26 2010
	City	•	Code	Transaction ID: 18701083
	Des Moines	IA 503	809-1829	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer lowa Hospital Association	Occupation Vice President, I	Education	
	Receipt For:	Aggregate Year-to-	Date ▼	
	Primary General Other (specify) ▼		500.00	
В.	Full Name (Last, First, Middle Initial) Mr. Greg E. Boattenhamer			Date of Receipt
	Mailing Address 100 East Grand Avenu Suite 100			10 26 2010
	City Des Moines		Code 809-1829	Transaction ID: 18701084 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1023	500.00
	Name of Employer lowa Hospital Association	Occupation Sr. Vice Preside	nt, Government Rela	tiq
	Receipt For:	Aggregate Year-to-	Date ▼	
	Primary General Other (specify) ▼		500.00	
C.	Full Name (Last, First, Middle Initial) Mr. Perry J. Meyer			Date of Receipt
	Mailing Address 1920 SE Olson Drive			10 26 YYYY 2010
	City	State Zip	Code	Transaction ID: 18701085
	Waukee	IA 502	263-8180	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer lowa Hospital Association	Occupation Vice President, I	nformation Center	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-	Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)			1500.00
	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 51 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using	nd Statements may not be sold or used by any persor the name and address of any political committee to s	n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAG	C	
Full Name (Last, First, Middle Initial) Mr. Art J. Spies	0.11.400	Date of Receipt
Mailing Address 100 E. Grand Ave. City	State Zip Code	1 0 2 6 2 0 1 0 Transaction ID: 18701086
Des Moines	IA 50309-1800	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer lowa Hospital Association	Occupation Senior Vice President, Membership Sv	− /¢s
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Maureen Keehnle		Date of Receipt
Mailing Address 100 East Grand Av Suite 100		10 26 7 2010
City Des Moines	State Zip Code IA 50309-1817	Transaction ID: 18701087
FEC ID number of contributing federal political committee.	IA 50309-1817	Amount of Each Receipt this Period 500.00
Name of Employer lowa Hospital Association	Occupation Vice President and General Counsel	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Steven P Baumert	l	Date of Receipt
Mailing Address P O Box 2C		10 26 2010
City	State Zip Code	Transaction ID: 18701104
Council Bluffs FEC ID number of contributing federal political committee.	IA 51502-3002	Amount of Each Receipt this Period 500.00
Name of Employer Jennie Edmundson Hospital	Occupation President and Chief Executive Officer	-
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	(lis	1500.00
	ber only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 52 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 11	
Any information copied from such Reports and or for commercial purposes, other than using to	Statements may not be sold or used by any person ne name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.	
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Ms. Marilyn E. Kaptain-Dahlen		Date of Receipt	
Mailing Address 801 15th Street Box 203 City	State Zip Code	1 0 2 6 2 0 1 0 Transaction ID: 18701105	
Sioux City	IA 51105-1502	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	500.00	
Name of Employer Mercy Medical Center-Sioux City	Occupation Vice President, Regionalization		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		
Full Name (Last, First, Middle Initial) Mr. Mark D Richardson Mailing Address 1221 South Coor Av	anua .	Date of Receipt	
Mailing Address 1221 South Gear Av	Mailing Address 1221 South Gear Avenue		
City	State Zip Code	Transaction ID: 18701106	
West Burlington	IA 52655-1681	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	500.00	
Name of Employer Great River Medical Center	Occupation President and Chief Executive Officer		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		
Full Name (Last, First, Middle Initial) Ms. Sandra L. McIntosh, RN, MA, CN		Date of Receipt	
Mailing Address 1208 Woodland Dr. S	SE	10 26 YYYYY 2010	
City	State Zip Code	Transaction ID: 18701107	
Cedar Rapids	IA 52403-9076	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	375.00	
Name of Employer St. Luke's Hospital	Occupation Director, Emergency Medical/Surgical		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00		
SURTOTAL of December This Deep (antional)		1375.00	
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line numb	<u> </u>		

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	for e	e separate schedule(s) each category of the ailed Summary Page	FOR LINE NUMBER: PAGE 53 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 11
,	Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be e name and address of	sold or used by any perso fany political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
ب 4.	Full Name (Last, First, Middle Initial) Ms. Mary S Wells, , R.N. Mailing Address P O Box 148			Date of Receipt
		O		10 26 2010
	City Sumner		p Code 0674-0148	Transaction ID: 18701108 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		350.00
	Name of Employer Community Memorial Hospit- al	Occupation Administrator		
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to	o-Date ▼ 350.00	
 3.	Full Name (Last, First, Middle Initial) Mr. C James Platt	1		Date of Receipt
	Mailing Address P O Box 174			10 26 7 2010
	City Fort Madison		p Code	Transaction ID: 18701129
	FEC ID number of contributing federal political committee.	C	2627-0174	Amount of Each Receipt this Period 300.00
	Name of Employer Fort Madison Community Ho- spital	Occupation Chief Executive	e Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to	o-Date ▼ 300.00	
- :.	Full Name (Last, First, Middle Initial) Mr Philip Peterson			Date of Receipt
	Mailing Address 701 Tenth Street SE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City		p Code	Transaction ID: 18701130
	Cedar Rapids FEC ID number of contributing federal political committee.	IA 52	2403-1292	Amount of Each Receipt this Period 300.00
	Name of Employer Mercy Medical Center	Occupation Senior Vice Pre	esident Finance	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to		
Г		1		

П	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS Any information copied from such Reports and Sta	atements ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 54 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 17 In for the purpose of soliciting contributions
A.	r for commercial purposes, other than using the r NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Jay Christensen Mailing Address 1229 'C' Avenue East City	name and add	dress of any political committee to	Date of Receipt Date of Receipt Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Oskaloosa FEC ID number of contributing federal political committee.	IA C	52577-4246	Amount of Each Receipt this Period 275.00
	Name of Employer Mahaska Health Partnership Receipt For: Primary General Other (specify) ▼	Occupation Administ Aggregate		
В.	Full Name (Last, First, Middle Initial) Mr. Clinton J Christianson, , FACHE Mailing Address 1 St Joseph's Drive City Centerville FEC ID number of contributing federal political committee. Name of Employer Mercy Medical Center-Centerville Receipt For: Primary General Other (specify) ▼		Zip Code 52544-9017 n t and Chief Executive Officer e Year-to-Date ▼ 275.00	Date of Receipt M M M / 26 / 2010 Transaction ID: 18701132 Amount of Each Receipt this Period 275.00
 C.	Full Name (Last, First, Middle Initial) Ms Joan Bierman Mailing Address 300 Sioux Valley Drive City Cherokee FEC ID number of contributing federal political committee. Name of Employer Cherokee Regional Medical Center Receipt For: Primary General Other (specify)	-	Zip Code 51012-1205 n sident Finance e Year-to-Date ▼ 262.50	Date of Receipt M M M / 26 / 2010 Transaction ID: 18701133 Amount of Each Receipt this Period 262.50
[;	SUBTOTAL of Receipts This Page (optional)		·····	812.50

TOTAL This Period (last page this line number only)

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 55 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 11
A	ny information copied from such Reports and S for commercial purposes, other than using the	statements may not be sold or used by any persename and address of any political committee t	son for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Mr. Robert C Travis		Date of Receipt
	Mailing Address 4827 School House Ro	State Zip Code	10 / 26 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Bettendorf	IA 52722-6577	Transaction ID: 18701140 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C 32722 3377	262.50
	Name of Employer Genesis Medical Center-Davenport Receipt For: Primary Other (specify)	Occupation VP of Strategic Development Aggregate Year-to-Date ▼ 262.50	
	Full Name (Last, First, Middle Initial) Ms. Pamela K Delagardelle Mailing Address 201 East 'J' Avenue		Date of Receipt
	City	State 7in Code	10 26 2010
	Grundy Center	State Zip Code IA 50638-2028	Transaction ID: 18701141 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C 30000 2020	250.00
	Name of Employer Grundy County Memorial Ho- spital	Occupation Chief Executive Officer	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Mr. Gregory A Paris, , CHE	<u>I</u>	Date of Receipt
	Mailing Address 6580 165th Street		10 26 2010
	City	State Zip Code	Transaction ID: 18701142
	Albia	IA 52531-8793	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Monroe County Hospital	Occupation Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)	1	762.50

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	ζ)	Use separate schedule(s) for each category of the Detailed Summary Page	Check only one) X 11a
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may	y not be sold or used by any perso	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		2000 C. W.) PONICE CO	
Full Name (Last, First, Middle Initial) Ms. Patricia A Markham			Date of Receipt
Mailing Address 1501 East Tenth St	M M / D D / Y Y Y Y Y 1 1 0 2 6 2 0 1 0		
City Atlantic	State IA	Zip Code 50022-1936	Transaction ID: 18701143 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00022 1000	250.00
Name of Employer Cass County Memorial Hosp- ital	Occupation Administ	n rator and Chief Executive Of	- fi
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Joseph S Smith			Date of Receipt
Mailing Address 1015 Union Street			10 26 2010
City Boone	State IA	Zip Code 50036-4898	Transaction ID: 18701144 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30030 4030	250.00
Name of Employer Boone County Hospital	Occupation Chief Exe	n ecutive Officer	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Gary P Riedmann, , FACHE			Date of Receipt
Mailing Address P O Box 628			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 18701150
Carroll FEC ID number of contributing federal political committee.	C	51401-0628	Amount of Each Receipt this Period 250.00
Name of Employer St. Anthony Regional Hosp- ital	Occupation Presiden	n t and Chief Executive Office	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional			750.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 57 / 261 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	I Statements may not be sold or used by any personal statements may not be sold or used by any personal he name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. A. James Tinker Mailing Address 701 Tenth Street SE City Cedar Rapids	State Zip Code	Date of Receipt M
FEC ID number of contributing federal political committee.	IA 52403-1251 C Occupation	Amount of Each Receipt this Period 250.00
Name of Employer Mercy Medical Center Receipt For: Primary General Other (specify) ▼	President and Chief Executive Officer Aggregate Year-to-Date ▼ 250.00	<u>. </u>
Full Name (Last, First, Middle Initial) Mr. John M Comstock Mailing Address 300 Sioux Valley Dri	ve	Date of Receipt 1 0 2 6 2 0 1 0
City	State Zip Code	Transaction ID: 18701152
Cherokee FEC ID number of contributing federal political committee.	IA 51012-1205	Amount of Each Receipt this Period 250.00
Name of Employer Cherokee Regional Medical Center Receipt For: Primary General Other (specify) ▼	Occupation Chief Executive Officer Aggregate Year-to-Date 250.00	1
Full Name (Last, First, Middle Initial) Mr. Todd C Linden		Date of Receipt
Mailing Address 210 Fourth Avenue		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18701153
Grinnell FEC ID number of contributing federal political committee.	IA 50112-1886	Amount of Each Receipt this Period 250.00
Name of Employer Grinnell Regional Medical Center	Occupation President and Chief Executive Officer	r
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	1	750.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 58 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 1
A or	for commercial purposes, other than using the	Statements may not be sold or used by any pers e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Dr. Lon D Butikofer, , R.N., Ph		Date of Receipt
	Mailing Address P O Box 359	Olate 7's Oads	10 26 2010
	City Manchester	State Zip Code IA 52057-0359	Transaction ID: 18701154 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Regional Medical Center	Occupation Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Mr. Francis G Tramp Mailing Address 1600 Diamond Street	1	Date of Receipt
	Mailing Address 1600 Diamond Street	10 26 2010	
	City	State Zip Code	Transaction ID: 18701163
	Onawa	IA 51040-1548	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Burgess Health Center	Occupation President	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Mr. Allen E Pohren		Date of Receipt
	Mailing Address P O Box 498		10 26 2010
	City	State Zip Code	Transaction ID: 18701164
	Red Oak	IA 51566-0498	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Montgomery County Memorial Hospital	Occupation Administrator	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
Γ,	CLIPTOTAL of Possista This Poss (entiand)		750.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 59 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Ar	y information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
<u> </u>	Full Name (Last, First, Middle Initial) Mr. Michael T Donlin Mailing Address P O Box 10 City	State Zip Code	Date of Receipt 10 26 2010 Transaction ID: 18701165
	Le Mars FEC ID number of contributing federal political committee.	IA 51031-0010	Amount of Each Receipt this Period 250.00
	Name of Employer Floyd Valley Hospital/Ave- ra Health Receipt For: Primary General Other (specify) ▼	Occupation Administrator Aggregate Year-to-Date ▼ 250.00	
3.	Full Name (Last, First, Middle Initial) Mr. Michael D Myers Mailing Address 40 First Street SE		Date of Receipt
	City Waukon FEC ID number of contributing	State Zip Code IA 52172-2022	Transaction ID: 18701166 Amount of Each Receipt this Period 250.00
	Name of Employer Veterans Memorial Hospital	Occupation Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Ms. Kim Price		Date of Receipt
	Mailing Address 110 Woodland Dr City	State Zip Code	10 26 2010 2010
	Forest City	IA 50436-2418	Transaction ID: 18701167 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Mercy Medical Center-North Iowa	Occupation Director, Clinics	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
s	UBTOTAL of Receipts This Page (optional)		750.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 60 / 261 (check only one) X
A 0	r for commercial purposes, other than using th	Statements may not be sold or used by any personal ename and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Dr. Carol A. Watson, Ph.D., RN		Date of Receipt
	Mailing Address 390 NB 50 Newton Road		10 26 2010
	City	State Zip Code	Transaction ID: 18701176
	lowa City	IA 52242-9296	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer University of Iowa Hospit- als and Clini	Occupation Professor-Clinical	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	325.00	
	Full Name (Last, First, Middle Initial) Mr. Michael D Trachta, , FACHE		Date of Receipt
	Mailing Address 312 Ninth Street SW		10 26 YYYYY 2010
	City	State Zip Code	Transaction ID: 18701177
	Waverly	IA 50677-2929	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Waverly Health Center	Occupation Chief Executive Officer	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	250.00	
_	Full Name (Last, First, Middle Initial) Ms. Toni Ebeling		Date of Receipt
	Mailing Address 532 First Street North Box 68		10 26 2010
	City	State Zip Code IA 50423-1227	Transaction ID: 18701178
	Britt From the Control of the Contro	IA 50423-1227	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Hancock County Memorial Hospital	Occupation Chief Executive Officer	
	Receipt For:	Aggregate Year-to-Date ▼	_
	Primary General Other (specify) ▼	250.00	
Г			750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 61 / 261 (check only one) X 11a 11b 11c 12
	and Statements may not be sold or used by any persor g the name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PA	C	
Full Name (Last, First, Middle Initial) Mr. Scott A Curtis		Date of Receipt
Mailing Address 1515 South Phillip		10 26 2010
City <u>Algona</u>	State Zip Code IA 50511-3649	Transaction ID: 18701179 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Kossuth Regional Health Center	Occupation Administrator and Chief Executive Offi	- i
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr Joseph LeValley Mailing Address 1111 6th Avenue		Date of Receipt
		10 26 2010
City Des Moines	State Zip Code IA 50314-2611	Transaction ID: 18701180 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 30314-2011	250.00
Name of Employer Mercy Medical Center-Des Moines	Occupation Senior Vice President Planning	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Brian Dieter		Date of Receipt
Mailing Address 1111 Duff Avenue		10 26 2010
City Ames	State Zip Code IA 50010-5745	Transaction ID: 18701194
FEC ID number of contributing federal political committee.	C 30010-5745	Amount of Each Receipt this Period 250.00
Name of Employer Mary Greeley Medical Cent- er	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (option	al)	750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 62 / 261 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Theresa Wahlig Mailing Address 300 Walnut St Unit 59 City Des Moines FEC ID number of contributing federal political committee. Name of Employer Mercy Medical Center - West Lakes Receipt For: Primary General Other (specify)	State Zip Code IA 50309-2240 C Occupation Trustee Aggregate Year-to-Date 250.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: 18701195 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Mr. Jeffrey M Cooper Mailing Address 1118 11th Street City De Witt FEC ID number of contributing federal political committee. Name of Employer Genesis Medical Center, DeWitt Receipt For: Primary General Other (specify)	State Zip Code IA 52742-1353 C Occupation Chief Executive Officer Aggregate Year-to-Date 250.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Ms Donna J Vandehaar, , R.N. Mailing Address 610 10th Street City Perry FEC ID number of contributing federal political committee. Name of Employer Dallas County Hospital Receipt For: Primary General Other (specify)	State Zip Code IA 50220-2221 C Occupation Chief Clinical Director Aggregate Year-to-Date 250.00	Date of Receipt M M Z 6 Z 0 1 0 Transaction ID: 18701197 Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional)		750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 63 / 261 (check only one) X
or for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Carol E. Twedt Mailing Address 4344 Pine Ridge Trai	INF	Date of Receipt
City	State Zip Code	1 0 2 6 2 0 1 0 Transaction ID: 18701198
lowa City	IA 52240-7830	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Mercy Iowa City	Occupation Director, Clinical Information Service	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Marie E Knedler, , R.N.	l	Date of Receipt
Mailing Address 17683 Lochland Rdg		10 26 7 2010
City	State Zip Code	Transaction ID: 18701221
Council Bluffs FEC ID number of contributing federal political committee.	IA 51503-4493	Amount of Each Receipt this Period 250.00
Name of Employer Alegent Health Mercy Hosp- ital	Occupation Vice President and Chief Operating O	ff
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr Jim Lehman		Date of Receipt
Mailing Address 3090 Lundy Ln		10 26 2010
City	State Zip Code	Transaction ID: 18701222
Bettendorf FEC ID number of contributing federal political committee.	IA 52722-3975	Amount of Each Receipt this Period 250.00
Name of Employer Genesis Medical Center-Da- venport Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Vice President, Quality Aggregate Year-to-Date 250.00	
SUBTOTAL of Receipts This Page (optional)		750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate sched for each category of Detailed Summary F	the (crieck only only)
Any information copied from such Reports and sor for commercial purposes, other than using the	Statements may not be sold or used by a name and address of any political cor	any person for the purpose of soliciting contributions mmittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr Robert McQuillen		Date of Receipt
Mailing Address 1078 Cedar Ridge Ct. City	State Zip Code	1 0 2 6 2 0 1 0 Transaction ID: 18701223
Peosta	IA 52068	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Mercy Medical Center-Dubu- gue	Occupation Trustee	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	0.00
Full Name (Last, First, Middle Initial) Mr. Jack Dusenbery, , CHE		Date of Receipt
Mailing Address 3421 West Ninth Stre	₹ 1	10 26 2010
City	State Zip Code	Transaction ID: 18701224
Waterloo	IA 50702-5499	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Covenant Medical Center	Occupation President and Chief Executiv	re Officer
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	0.00
Full Name (Last, First, Middle Initial) Mr. Kenneth Croken		Date of Receipt
Mailing Address 1227 E Rusholme St		10 26 2010
City	State Zip Code IA 52803-2459	Transaction ID: 18701225
Davenport FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 250.00
Name of Employer Genesis Medical Center-Da-	Occupation VP of Corporate Communica	ation&Marketin
venport Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	25	0.00
SUBTOTAL of Receipts This Page (optional) .		750.00
TOTAL This Period (last page this line number	only)	

ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 65 / 261 (check only one) X 11a
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PA	С		
Full Name (Last, First, Middle Initial) Mr William Langley			Date of Receipt
Mailing Address 128 Fernwood Ave).		10 26 2010
City	State	Zip Code	Transaction ID: 18701228
Davenport	IA	52803-3605	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Genesis Health System	Occupatio Medical I	n Executive Director	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Wayne A. Smith			Date of Receipt
Mailing Address 1280 South Govern	nors Avenue		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 18704178
Dover	DE	19904-4802	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Delaware Healthcare Assoc- iation	Occupatio Presiden		
Receipt For:		e Year-to-Date ▼	
Primary General Other (specify) ▼		500.00	
Full Name (Last, First, Middle Initial) Ms. Penny Brooke			Date of Receipt
Mailing Address 2879 Jennie Lane			1 1 0 2 2 0 1 0
City	State	Zip Code	Transaction ID: 18717193
Salt Lake City	UT	84117-5513	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		5.00
Name of Employer Intermountain Healthcare, Inc.	Occupatio Trustee		
Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
Other (specify)		355.00	
			755.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 66 / 261 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any perse e name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Paul J. DellaRocco Mailing Address 30 Warren Street City Boston FEC ID number of contributing federal political committee. Name of Employer Franciscan Hospital for Children Receipt For: Primary General	State Zip Code MA 02135-3602 C Occupation President & CEO Aggregate Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Other (specify) Full Name (Last, First, Middle Initial) Ms. Bernadine Marcuccilli Wallace Mailing Address 1003 Overlook Road	500.00	Date of Receipt 1 1 0 3 2 0 1 0
City	State Zip Code	Transaction ID: 18719470
Marion FEC ID number of contributing federal political committee. Name of Employer	IN 46952-1330 C Occupation	Amount of Each Receipt this Period 250.00
Marion General Hospital Receipt For: Primary General Other (specify)	CNO/COO Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. James D. Bickel		Date of Receipt
Mailing Address 4370 Washington Stre	eet	11 03 2010
City	State Zip Code IN 47203-1139	Transaction ID: 18719473
Columbus FEC ID number of contributing federal political committee.	IN 47203-1139	Amount of Each Receipt this Period 250.00
Name of Employer Columbus Regional Hospital	Occupation President/CEO	
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
-		1000.00

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) X
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American Hospital Association Page 1	and Statements may not be sold or used by any persor ng the name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. David R Doerr Mailing Address 1606 North Sever	nth Street	Date of Receipt
City Terre Haute	State Zip Code IN 47804-2706	1 1 0 3 2 0 1 0 Transaction ID: 18719475
FEC ID number of contributing federal political committee.	C 47804-2706	Amount of Each Receipt this Period 500.00
Name of Employer Union Hospital Receipt For:	Occupation Chief Executive Officer	-
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Mr. Robert J Brody Mailing Address 1805 Braeburn Dr	ive	Date of Receipt
City	State Zip Code	1 1 0 3 2 0 1 0 Transaction ID: 18719477
Carmel FEC ID number of contributing federal political committee.	IN 46032-8364	Amount of Each Receipt this Period 250.00
Name of Employer SSFHS - St. Francis Hospi- tal and Healt Receipt For: Primary General Other (specify) ▼	Occupation President and Chief Executive Officer Aggregate Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) Dr. John A. Griep, M.D. Mailing Address P.O. Box 1220		Date of Receipt
City	State Zip Code	1 1 0 3 2 0 1 0 Transaction ID: 18719496
Valparaiso FEC ID number of contributing federal political committee.	IN 46384-1220	Amount of Each Receipt this Period 400.00
Name of Employer St. Catherine Hospital	Occupation Director of Medical Affairs	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
SUBTOTAL of Receipts This Page (option	nal)	1150.00

City State Zip Code IN 46706-9511	Use separate for each cate. Detailed Sum	h c	ry of the	5)	FOR LINE (check only 11a 13		_	\rightarrow	3 / 261 12 16
Authorican Hospital Association PAC Full Name (Last, First, Middle Initial) D. James Buchanan, M.D. Mailing Address 2653 Country Road 60 City State Zip Code James of Employer FeC ID number of contributing federal political committee Name of Employer Fort Wayne Medical Educat- Jone Program Receipt For: Primary General Other (specify) ▼ Mailing Address 53308 Monticola Lane City Bristol FEC ID number of contributing federal political committee C Late of Receipt Transaction ID: 18719523 Amount of Each Receipt this Pe Aggregate Year-to-Date ▼ Transaction ID: 18719527 Amount of Each Receipt Mailing Address 53308 Monticola Lane City Bristol FEC ID number of contributing federal political committee Name of Employer Elichart General Healthcare System Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mis. Karen Pother Mailing Address 13556 Ashbury Drive City Carmel IN 46932-8225 Full Name (Last, First, Middle Initial) Mis. Karen Pother Mailing Address 13556 Ashbury Drive City Carmel IN 46932-8225 FeC ID number of contributing federal political committee C 1771 Scale Tip Code IN 46932-8225 Full Name (Last, First, Middle Initial) Mis. Karen Pother Mailing Address 13556 Ashbury Drive City Carmel IN 46932-8225 FeC ID number of contributing federal political committee C 25	rts and Statements may not be sold or u using the name and address of any polit	old c ny p	ed by any p al committe	person tee to s	for the purposolicit contribu	ose of s utions fr	oliciting om sucl	contribut n commit	ions tee.
A. Dr. James Buchanan, M.D. Mailing Address 2653 County Road 60 City State Zip Code IN 46706-9511 FEC ID number of contributing federal political committee. Name of Employer For Wayne Medical Education Program Receipt For: Primary General Other (specify) ▼ State Zip Code IN 45507-9692 Transaction ID: 18719513 Amount of Each Receipt this Pe 50 Transaction ID: 18719513 Amount of Each Receipt this Pe 50 Date of Receipt For: Primary General Occupation CEO Transaction ID: 18719527 Transaction ID: 18719527 Amount of Each Receipt this Pe 50 Date of Receipt Signature Signat	PAC								
City State Zip Code Transaction ID: 18719513 Auburn IN 46706-9511 Amount of Each Receipt this Perfect ID number of contributing federal political committee. Name of Employer Eichard General Ditte and Carmel For Imany General Transaction ID: 18719527 Transaction ID: 18719527 Date of Receipt Transaction ID: 18719527 Amount of Each Receipt this Perfect ID number of contributing federal political committee. Date of Receipt For Imany General					Date of	Receipt			
Auburn IN 46706-9511 FEC ID number of contributing federal political committee. Name of Employer C Primary General PEC ID number of contributing federal political committee. Name of Employer Sate					1 1		03	2 0	0 1 0
FEC ID number of contributing federal political committee. Name of Employer Fort Wayne Medical Education Program Receipt For: Primary General Other (specify) ▼									اد ما
ion Program Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Gregory W Lintjer Mailing Address 53308 Monticola Lane City State Zip Code Bristol IN 46507-9692 FEC ID number of contributing federal political committee. Name of Employer Eikhart General Healthcare System Receipt For: Primary General Other (specify) ▼ State Zip Code IN 46507-9692 Amount of Each Receipt this Pe FUI Name (Last, First, Middle Initial) Ms. Karen Porter Mailing Address 13556 Ashbury Drive City State Zip Code IN 46032-8225 Transaction ID: 18719527 Amount of Each Receipt this Pe Date of Receipt Transaction ID: 18719527 Amount of Each Receipt this Pe Date of Receipt Transaction ID: 18719527 Amount of Each Receipt this Pe To Date of Receipt Transaction ID: 18719527 Amount of Each Receipt this Pe Transaction ID: 18719527		<u> </u>			Amount	or Eacr	Receip	-	0.00
Receipt For:	,								
Transaction ID: 18719527 Amount of Employer Eikhart General Healthcare System Receipt For: Primary General Mailing Address 13556 Ashbury Drive C City State Zip Code IN	Aggregate Year-to-Date	ate			1				
Mailing Address 53308 Monticola Lane City State Zip Code IN 46507-9692 FEC ID number of contributing federal political committee. Name of Employer Eikhart General Healthcare System Receipt For: Primary General Other (specify) ▼ City State Zip Code IN 46507-9692 Transaction ID: 18719527 Amount of Each Receipt this Pe 50 Transaction ID: 18719527 Amount of Each Receipt this Pe 50 Transaction ID: 18719527 Amount of Each Receipt this Pe 50 Transaction ID: 18719527 Amount of Each Receipt this Pe 50 Date of Receipt ID: 18719527 Transaction ID: 18719527 Amount of Each Receipt this Pe 50 Date of Receipt ID: 18719527 Transaction ID: 18719558 Amount of Each Receipt ID: 18719558 Transaction ID: 18719558 Amount of Each Receipt ID: 18719558 Amount of Each Receipt this Pe 50 Transaction ID: 18719558 Amount of Each Receipt ID: 18719558 Amou									
City State Zip Code Bristol IN 46507-9692 FEC ID number of contributing federal political committee. Name of Employer Elkhart General Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Karen Porter Mailing Address 13556 Ashbury Drive City State Zip Code IN 46032-8225 FEC ID number of contributing federal political committee. City State Zip Code IN 46032-8225 FEC ID number of contributing federal political committee. City State Zip Code IN 46032-8225 City State Zip Code IN 46032-8225 FEC ID number of contributing federal political committee. City State Zip Code IN 46032-8225 City State Zip Code IN 46032-8225 Amount of Each Receipt this Pe City State Zip Code IN 46032-8225 City State Zip Code IN 46032-8225 Amount of Each Receipt this Pe City State Zip Code IN 46032-8225 Amount of Each Receipt this Pe City State Zip Code IN 46032-8225 Amount of Each Receipt this Pe City State Zip Code IN 46032-8225 Amount of Each Receipt this Pe City State Zip Code IN 46032-8225 Amount of Each Receipt This Pe City State Zip Code IN 46032-8225 Amount of Each Receipt This Pe City State Zip Code IN 46032-8225 Amount of Each Receipt This Pe City State Zip Code IN 46032-8225 Amount of Each Receipt This Pe Aggregate Year-to-Date ▼					Date of	Receipt			
Bristol IN 46507-9692 Amount of Each Receipt this Perfect ID number of contributing federal political committee. Name of Employer Elkhart General Healthcare System Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Karen Porter Mailing Address 13556 Ashbury Drive City State Zip Code IN 46032-8225 City State Zip Code IN 46032-8225 FEC ID number of contributing federal political committee. Name of Employer St. Vincent Health Name of Employer St. Vincent Health Receipt For: Primary General Occupation System VP & Chief Planning Officer Aggregate Year-to-Date ▼ Amount of Each Receipt this Perfect St. Vincent Health Amount of Each Receipt this Perfect St. Vincent Health Amount of Each Receipt this Perfect St. Vincent Health Amount of Each Receipt this Perfect St. Vincent Health Amount of Each Receipt this Perfect St. Vincent Health Amount of Each Receipt this Perfect St. Vincent Health Amount of Each Receipt this Perfect St. Vincent Health Amount of Each Receipt this Perfect St. Vincent Health Amount of Each Receipt This Perfect St. Vincent Health Amount of Each Receipt This Perfect St. Vincent Health Amount of Each Receipt This Perfect St. Vincent Health Amount of Each Receipt This Perfect St. Vincent Health Amount of Each Receipt This Perfect St. Vincent Health Amount of Each Receipt This Perfect St. Vincent Health Amount of Each Receipt This Perfect St. Vincent Health Amount of Each Receipt This Perfect St. Vincent Health	la Lane								10
FEC ID number of contributing federal political committee. Name of Employer Elkhart General Healthcare System Receipt For:	•	Code			Transac	tion ID:	18719	9527	
Name of Employer Elkhart General Healthcare System Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Karen Porter Mailing Address 13556 Ashbury Drive City State Zip Code IN 46032-8225 FEC ID number of contributing federal political committee. Name of Employer St. Vincent Health System VP & Chief Planning Officer Receipt For: Primary General Occupation System VP & Chief Planning Officer Aggregate Year-to-Date ▼ Transaction ID: 18719558 Amount of Each Receipt this Pe 25	IN 46507-9692)7-9			Amount	of Each	Receip	t this Pe	riod
Elkhart General Healthcare System Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Karen Porter Mailing Address 13556 Ashbury Drive City State Zip Code Carmel IN 46032-8225 FEC ID number of contributing federal political committee. Name of Employer St. Vincent Health System VP & Chief Planning Officer Receipt For: Primary General Hospital President Aggregate Year-to-Date ▼ Date of Receipt Transaction ID: 18719558 Amount of Each Receipt this Pe 25 Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼	C							500	0.00
Receipt For: Primary		nt							
Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Karen Porter Mailing Address 13556 Ashbury Drive City State Zip Code Carmel IN 46032-8225 FEC ID number of contributing federal political committee. Name of Employer St. Vincent Health System VP & Chief Planning Officer Receipt For: Primary General Date of Receipt Transaction ID: 18719558 Amount of Each Receipt this Pe	Aggregate Year-to-Date ▼	ate			1				
Ms. Karen Porter Mailing Address 13556 Ashbury Drive City State Zip Code Carmel IN 46032-8225 FEC ID number of contributing federal political committee. Name of Employer St. Vincent Health Receipt For: Primary General Date of Receipt M M M			500.00						
City State Zip Code Transaction ID: 18719558 Carmel IN 46032-8225 FEC ID number of contributing federal political committee. Name of Employer St. Vincent Health Receipt For: Primary General State Zip Code Transaction ID: 18719558 Amount of Each Receipt this Pe 25 Agregate Year-to-Date ▼					Date of	Receipt			
Carmel IN 46032-8225 FEC ID number of contributing federal political committee. C	r Drive) 1 0
FEC ID number of contributing federal political committee. Name of Employer St. Vincent Health System VP & Chief Planning Officer Receipt For: Primary General Aggregate Year-to-Date 250									
federal political committee. Name of Employer St. Vincent Health Occupation System VP & Chief Planning Officer Receipt For: Primary General Aggregate Year-to-Date 755, 00		32-8			Amount	of Each	Receip		1 1
St. Vincent Health System VP & Chief Planning Officer Receipt For: Primary General Aggregate Year-to-Date 350,00	C							250	0.00
Primary General 350,00	,	ef F	ning Offic	cer					
250.00	Aggregate Year-to-Date ▼	ate							
		0	250.00						
SUBTOTAL of Receipts This Page (optional)	otional)			•				1250	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 69 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Trina Marlatt Mailing Address 3654 N. 850 E. City Attica FEC ID number of contributing federal political committee. Name of Employer St. Vincent Williamsport Hospital Receipt For: Primary General Other (specify)	State Zip Code IN 47918-8041 C Occupation Registered Nurse, Chief Nursing Office Aggregate Year-to-Date ▼ 250.00	Date of Receipt M M M / D D / Y Y Y Y Y 1 1 1 0 3 2 2 0 1 0 Transaction ID: 18719570 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Mr. Francis G Albarano Mailing Address 1322 Quail Ridge City Richmond FEC ID number of contributing federal political committee. Name of Employer St. Vincent Randolph Hospital	State Zip Code IN 47374-7176 C Occupation Administrator	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Ms. Heather Drevna Mailing Address 3205 Ravensworth PL	Aggregate Year-to-Date ▼ 250.00	Date of Receipt
City Alexandria FEC ID number of contributing federal political committee. Name of Employer American Hospital Associa-	State Zip Code VA 22302-2107 C Occupation Director Advocacy and Member Comm	1 1 0 4 2 0 1 0 Transaction ID: 18722633 Amount of Each Receipt this Period 350.00
tion-Washingt Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number)		850.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 70 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 16
Any i	nformation copied from such Reports and S r commercial purposes, other than using the	tatements may not be sold or used by any pers name and address of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
\ \	AME OF COMMITTEE (In Full) Imerican Hospital Association PAC		
. <u>M</u>	ull Name (Last, First, Middle Initial) Ir. William H Considine		Date of Receipt
_	lailing Address One Perkins Square ity	State Zip Code	1 1 0 1 2 0 1 0 Transaction ID: 18722959
	ıkron	OH 44308-1062	Amount of Each Receipt this Period
FI	EC ID number of contributing oderal political committee.	C	250.00
N A	ame of Employer kron Children's Hospital	Occupation President	
R	eceipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	ull Name (Last, First, Middle Initial) Is. Barbara Steele		Date of Receipt
M	lailing Address 2142 North Cove Boule	evard	1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	ity	State Zip Code	Transaction ID: 18722960
I	oledo	OH 43606-3896	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	С	250.00
N P	ame of Employer roMedica Health System	Occupation Regional President	
R	eceipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
	ull Name (Last, First, Middle Initial) Ir. Danny L Boggs		Date of Receipt
M	lailing Address 1025 Center Street		1 1 D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
	ity	State Zip Code	Transaction ID: 18722961
FI	shland EC ID number of contributing deral political committee.	OH 44805-4011	Amount of Each Receipt this Period 250.00
N S	ame of Employer amaritan Regional Health ystem	Occupation President and Chief Executive Office	er
	eceipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	250.00	
			750.00

Mercy Medical Center Receipt For: Primary Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Bradley Bond Mailing Address 234 Goodman Street City Cincinnati FEC ID number of contributing federal political committee. Cancer Contributing federal political committee. Name of Employer University Hospital	ate Zip Code H 44708-2614 upation sident and Chief Executive regate Year-to-Date 250.00	Date of Receipt Transaction ID: 18722970 Amount of Each Receipt this Period 250.00 Date of Receipt 2010 Transaction ID: 18720 Amount of Each Receipt this Period 250.00
Mr. Thomas E Cecconi Mailing Address 1320 Mercy Drive NW City St. Canton O FEC ID number of contributing federal political committee. Name of Employer Mercy Medical Center Receipt For: Agg Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Bradley Bond Mailing Address 234 Goodman Street City St. Cincinnati O FEC ID number of contributing federal political committee. City Cincinnati C Name of Employer University Hospital Receipt For: Agg	upation sident and Chief Executive regate Year-to-Date ▼	Transaction ID: 18722970 Amount of Each Receipt this Period 250.00 Date of Receipt M M / D D / Y Y Y Y Y
Canton FEC ID number of contributing federal political committee. Name of Employer Mercy Medical Center Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Bradley Bond Mailing Address 234 Goodman Street City St. Cincinnati O FEC ID number of contributing federal political committee. Name of Employer University Hospital Receipt For: Primary General	upation sident and Chief Executive regate Year-to-Date ▼	Amount of Each Receipt this Period 250.00 Date of Receipt M M / D D / Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Mercy Medical Center Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Bradley Bond Mailing Address 234 Goodman Street City Str. Cincinnati Oi FEC ID number of contributing federal political committee. Name of Employer University Hospital Receipt For: Primary General	upation sident and Chief Executive regate Year-to-Date ▼ 250.00	Date of Receipt
Receipt For: Primary Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Bradley Bond Mailing Address 234 Goodman Street City Cincinnati FEC ID number of contributing federal political committee. Name of Employer University Hospital Receipt For: Primary General	sident and Chief Executive regate Year-to-Date ▼ 250.00	M M / D D / Y Y Y Y
Mr. Bradley Bond Mailing Address 234 Goodman Street City St. Cincinnati Ol FEC ID number of contributing federal political committee. Name of Employer University Hospital Receipt For: Primary General	Tin Oods	M M / D D / Y Y Y
Cincinnati FEC ID number of contributing federal political committee. Name of Employer University Hospital Receipt For: Primary General	-t- Zia Cada	
Cincinnati FEC ID number of contributing federal political committee. Name of Employer University Hospital Receipt For: Primary General	ate Zip Code	Transaction ID: 18722984
FEC ID number of contributing federal political committee. Name of Employer University Hospital Receipt For: Primary General	' '	Amount of Each Receipt this Period
University Höspîtal Vice Receipt For: Primary General Agg		250.00
Primary General	upation e President of Treasury	
Other (specify)	regate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Michael Vehovec		Date of Receipt
Mailing Address 11100 Euclid Avenue		1 1 0 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
•	ate Zip Code	Transaction ID: 18722985
<u>Cleveland</u> Ol	H 44106-2602	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		250.00
University Höspitals Case Medical Cent Vice	upation President and CEO	
Receipt For: Primary General Other (specify) ▼	regate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		750.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 72 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or for	oformation copied from such Reports and St commercial purposes, other than using the AME OF COMMITTEE (In Full) merican Hospital Association PAC	atements may not be sold or used by any pers name and address of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
Mr. <u>M</u> r	Il Name (Last, First, Middle Initial) David Cook ailing Address 234 Goodman Street		Date of Receipt M M D D Y Y Y Y Y Y Y Y
Cit Ci	ty Incinnati	State Zip Code OH 45219-2364	Transaction ID: 18722993 Amount of Each Receipt this Period
FE	EC ID number of contributing deral political committee.	C	500.00
	ame of Employer niversity Hospital	Occupation Vice President	
Re	eceipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
Ms	III Name (Last, First, Middle Initial) s Sonia Salvino ailing Address 44 Blaine Avenue		Date of Receipt
Cit	ty	State Zip Code	Transaction ID: 18722994
FE	eveland C ID number of contributing deral political committee.	OH 44146-2799	Amount of Each Receipt this Period 250.00
Na Ul er	ame of Employer HHS Bedford Medical Cent-	Occupation Director Finance	
	eceipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
	Il Name (Last, First, Middle Initial) : Brent Carson		Date of Receipt
_	ailing Address 1783 Farrs Garden Pat	h	1 1 0 1 2 0 1 0
Cit	•	State Zip Code	Transaction ID: 18722995
FE	Setlake CID number of contributing deral political committee.	OH 44145-2067	Amount of Each Receipt this Period 250.00
<u>M</u> e	ame of Employer niversity Hospitals Case edical Cent	Occupation Vice President	
Re	eceipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUB	TOTAL of Receipts This Page (optional)		1000.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 73 / 261 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements may	 y not be sold or used by any perso dress of any political committee to	13 14 15 16 0 16 0 17 18 18 19 19 19 19 19 19 19 19 19 19 19 19 19
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. Steven Standley			Date of Receipt
Mailing Address 29000 Center Ridge R	ld.		M M / D D / Y Y Y Y Y 1 1 1 0 1 2 0 1 0
City	State	Zip Code	Transaction ID: 18723006
Westlake	OH	44145-5293	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer St. Vincent Charity Medic-	Occupatio	n ecutive Officer	
<u>al Center</u> Receipt For:	- 	e Year-to-Date	\dashv
Primary General Other (specify) ▼	riggregate	250.00	
Full Name (Last, First, Middle Initial) Dr. Fred C Rothstein, . M.D.	l		Date of Receipt
Mailing Address 1080 W Hill Drive			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 18723012
Gates Mills	ОН	44040-9627	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer University Hospitals Case Medical Cent	Occupatio Presiden		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Richard Hanson			Date of Receipt
Mailing Address 12340 Bass Lake Roa	d		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 18723013
Chardon	OH	44024-8327	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer University Hospitals Exte- nded Care Cam	Occupatio Presiden		
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		500.00	
SUBTOTAL of Receipts This Page (optional)			1250.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 74 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American Hospital Association PA	and Statements may not be sold or used by any person g the name and address of any political committee to s	for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Mary Alice Annecharico		Date of Receipt
Mailing Address 234 Goodman Stre	eet	M M / D D / Y Y Y Y Y Y 1 1 1 0 1 2 0 1 0
City	State Zip Code	Transaction ID: 18723014
Cincinnati	OH 45219-2364	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer University Hospital	Occupation Sr. Vice President and Chief Informati	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Paul Tait		Date of Receipt
Mailing Address 6560 Thorntree Dr	ive	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18723015
Brecksville	OH 44141-1769	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer University Hospitals Case Medical Cent	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr Michael A. Szubski		Date of Receipt
Mailing Address 11100 Euclid Aver	nue	1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18723016
Cleveland	OH 44106-1716	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer University Hospitals	Occupation COO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (option	nal)	1500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 75 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the	atements may not be sold or used by any pename and address of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Michael Nochomovitz		Date of Receipt
Mailing Address 118 Partridge Lane		11 01 2010
City Chagrin Falls	State Zip Code OH 44022-4042	Transaction ID: 18723018
FEC ID number of contributing federal political committee.	C 44022-4042	Amount of Each Receipt this Period 500.00
Name of Employer UHHS Richmond Heights Hos- pital	Occupation CEO	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. John E. Callender		Date of Receipt
Mailing Address 2743 Elginfield Road		1 1 0 1 2 0 1 0
City	State Zip Code	Transaction ID: 18723020
Upper Arlington	OH 43220-4247	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Ohio Hospital Association	Occupation Senior Vice President & CFO	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Ms. Mary C. Becker		Date of Receipt
Mailing Address 7800 South Eagle Roa		11 03 7 2010
City Columbia	State Zip Code MO 65203-9017	Transaction ID: 18723028
FEC ID number of contributing federal political committee.	MO 65203-9017	Amount of Each Receipt this Period 48.13
Name of Employer Missouri Hospital Associa- tion	Occupation Senior VP, Commc. & Health Impl	rovement
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	336.91	
SUBTOTAL of Receipts This Page (optional)		648.13
TOTAL This Period (last page this line number		•

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 76 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any perso ne name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Daniel R. Landon Mailing Address 1811 Forest Park Co City Jefferson City FEC ID number of contributing federal political committee. Name of Employer Missouri Hospital Associa-	State Zip Code MO 65109-9782 C Occupation	Date of Receipt M M M / D D / Y Y Y Y Y 1 1 1 0 3 2 2 0 1 0 Transaction ID: 18723036 Amount of Each Receipt this Period 62.50
missour Hospital Association Receipt For: Primary General Other (specify) ▼	Sr. Vice President, Governmental Rel Aggregate Year-to-Date ▼ 437.50	at
Full Name (Last, First, Middle Initial) Ms. Kathleen C. Poff Mailing Address 5119 Coventry Waye		Date of Receipt 1 1 0 3 2 0 1 0
City	State Zip Code	Transaction ID: 18723041
Jefferson City	MO 65101-8284	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	48.13
Name of Employer Missouri Hospital Associa- tion	Occupation Senior Vice President & CFO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 336.91	
Full Name (Last, First, Middle Initial) Mr. Jerry M. Sill		Date of Receipt
Mailing Address 2906 Valley View Ter	race	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18723044
Jefferson City	MO 65109-1069	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	48.13
Name of Employer Missouri Hospital Associa- tion	Occupation Senior Vice President & General Cour	nse
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 336.91	
SUBTOTAL of Receipts This Page (optional)		158.76
TOTAL This Period (last page this line number	er only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 77 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any perse name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Michael J Gillen Mailing Address 100 Hospital Drive City Lebanon FEC ID number of contributing federal political committee. Name of Employer St. John's Hospital - Lebanon Receipt For: Primary General Other (specify)	State Zip Code MO 65536-9210 C Occupation President Aggregate Year-to-Date ▼ 350.00	Date of Receipt 1 1
Full Name (Last, First, Middle Initial) Mr. Thomas C. Jividen Mailing Address 2713 Greenhill Avenue City Lynchburg FEC ID number of contributing	State Zip Code VA 24503-2923	Date of Receipt M M M O 4 2010 Transaction ID: 18723059 Amount of Each Receipt this Period 350.00
Name of Employer Centra Lynchburg General Hospital Receipt For: Primary General Other (specify)	Occupation Senior Vice President Aggregate Year-to-Date 350.00]
Full Name (Last, First, Middle Initial) Mr. Emory W. Tibbs, Jr. Mailing Address 1740 Hidden Oaks La		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Bedford FEC ID number of contributing federal political committee.	State Zip Code VA 24523-6864	Transaction ID: 18723060 Amount of Each Receipt this Period 350.00
Name of Employer Centra Health, Inc. Receipt For: Primary General Other (specify)	Occupation Senior Vice President Operations Aggregate Year-to-Date 350.00	
SUBTOTAL of Receipts This Page (optional)		1050.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 78 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person ename and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr Lewis C Addison Mailing Address 209 Glasgow Dr City Amherst FEC ID number of contributing federal political committee. Name of Employer Centra Lynchburg General Hospital Receipt For: Primary General	State Zip Code VA 24521-4329 C Occupation Senior Vice President and Chief Fina Aggregate Year-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Brian Gradle Mailing Address 400 Great Falls St City Falls Church FEC ID number of contributing federal political committee.	State Zip Code VA 22046-2608	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Bon Secours-Richmond Community Hospita Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	Occupation Vice President Corporate Aggregate Year-to-Date 350.00	
Ms. Donna Littlepage Mailing Address PO Box 25 City Roanoke	State Zip Code VA 24002-0025	Date of Receipt M M / D D / Y Y Y Y Y 1 1 0 5 2 0 1 0 Transaction ID: 18723070 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Carilion Clinic	Occupation Vice President, Finance	350.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)		900.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 79 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person ne name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms Stephanie L Bloom Mailing Address 109 Rowan Court City Manahawkin FEC ID number of contributing federal political committee. Name of Employer Community Medical Center Receipt For: Primary General Other (specify)	State Zip Code NJ 08050-2900 C Occupation Chief Operating Officer Aggregate Year-to-Date 250.00	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Joseph A. Carr Mailing Address 2378 Orchard Crest City Manasquan FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For:	State Zip Code NJ 08736-4001 C Occupation Chief Information Officer Aggregate Year-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y 1 0 2 9 2 0 1 0 Transaction ID: 18723076 Amount of Each Receipt this Period 10.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Jessica Cohen Mailing Address 760 Alexander Road City Princeton FEC ID number of contributing federal political committee.	210.00 State Zip Code NJ 08540-6305 C	Date of Receipt M M M / D D / Y Y Y Y Y 1 0 29 2010 Transaction ID: 18723080 Amount of Each Receipt this Period 10.00
Name of Employer New Jersey Hospital Association Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)	Occupation Director Aggregate Year-to-Date 210.00	270.00

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Ms Beining Brown Cooper Mailing Address 121 Clear Creek Road City State Zip Code Langhorne PA 18947 FEC ID number of contributing federal political committee. C cocupation Now dersey Hospital Association Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms Threesa L. Edisterian Mailing Address 27 Harvest Lane City State Zip Code Livingston Name of Employer New Jersey Hospital Association Name of Employer Name of Employer Name of Employer New Jersey Hospital Association Name of Employer	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 80 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Mailing Address 121 Clear Creek Road City State Zip Code Langhorne PA 19947 FEC ID number of contributing federal political committee. Primary General Other (specify) ▼ C C City State Zip Code Livingston Nu 07039-2750 City State Zip Code Transaction ID: 18723082 Amount of Each Receipt this Period Transaction ID: 18723082 Amount of Each Receipt this Period Transaction ID: 18723082 Amount of Each Receipt this Period Transaction ID: 18723082 Amount of Each Receipt this Period Transaction ID: 18723082 Amount of Each Receipt this Period Transaction ID: 18723082 Amount of Each Receipt this Period Transaction ID: 18723082 City State Zip Code Livingston Nu 07039-2750 FCII Number of contributing federal political committee. C C Cocupation Vice President Continuing Care Service Receipt This Period Transaction ID: 18723092 Amount of Each Receipt this Period Transaction I	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Primary General City State Zip Code City Coupation City	Ms. Belinda Brown Cooper Mailing Address 121 Clear Creek Road City Langhorne FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association	State Zip Code PA 19047 C Occupation Vice President, Human Resources	Transaction ID: 18723082 Amount of Each Receipt this Period
Mailing Address 27 Harvest Lane City State Zip Code NJ 07039-2750 FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify) ▼	Other (specify) ▼ Full Name (Last, First, Middle Initial)	210.00	
Livingston NJ 07039-2750 Amount of Each Receipt this Period PEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify) ▼ Cocupation Nice President Continuing Care Service Aggregate Year-to-Date ▼ 100 Date of Receipt Name (Last, First, Middle Initial) Mr. Sean J. Hopkins Mailing Address 6180 Lower Mountain Road City State Zip Code New Hope PA 18938 FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General Occupation Sr. VP., Health Economics Aggregate Year-to-Date ▼ Cocupation Sr. VP., Health Economics	Mailing Address 27 Harvest Lane	State Zip Code	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Aggregate Year-to-Date ▼ Other (specify) ▼	FEC ID number of contributing		
Mr. Sean J. Hopkins Mailing Address 6180 Lower Mountain Road City State Zip Code New Hope PA 18938 FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify) ▼ Date of Receipt Transaction ID: 18723092 Amount of Each Receipt this Period 10.00	iation Receipt For: Primary General	Vice President Continuing Care Service Aggregate Year-to-Date ▼	Ce
City New Hope PA 18938 FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary Other (specify) ▼ City State Zip Code PA 18938 Amount of Each Receipt this Period Cocupation Sr. VP., Health Economics Aggregate Year-to-Date ▼ 618.35	Mr. Sean J. Hopkins	Road	╡
New Hope FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify) ▼ Amount of Each Receipt this Period 10.00 C Amount of Each Receipt this Period 10.00 Agregate Year-to-Date ▼ 618.35			10 29 2010
Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify) ▼ Occupation Sr. VP., Health Economics Aggregate Year-to-Date ▼ 618.35	•	•	
iation Receipt For: Primary Other (specify) General Other (specify) Aggregate Year-to-Date 618.35		C	10.00
Primary General Other (specify) ▼ 618.35	iation	Sr. VP., Health Economics	
SUBTOTAL of Receipts This Page (optional)	Primary General		
	SUBTOTAL of Receipts This Page (optional)	·····	230.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	K PAGE 81 / 261 (check only one) 11b 11c 12 13 14 15 16 1
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American Hospital Association PA	and Statements may not be sold or used by any person g the name and address of any political committee to s	for the purpose of soliciting contributions olicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Fredrick J. Jacobs		Date of Receipt
Mailing Address 23 E. Delaware Av	/enue	10 29 2010
City	State Zip Code	Transaction ID: 18723094
<u>Pennington</u>	NJ 08534-2302	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer New Jersey Hospital Assoc- iation	Occupation General Counsel	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	
Full Name (Last, First, Middle Initial) Mr. William D. Kennedy		Date of Receipt
Mailing Address 1549 North Valley	Road	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18723096
<u>Malvern</u>	PA 19355	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer New Jersey Hospital Assoc- iation	Occupation Senior Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	
Full Name (Last, First, Middle Initial) Mr. Timothy J. Keough		Date of Receipt
Mailing Address 23 Nelson Drive		10 29 2010
City	State Zip Code	Transaction ID: 18723097
Barnegat	NJ 08005-2174	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer New Jersey Hospital Assoc- iation	Occupation Vice President, Health Information Mg] m
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	
SUBTOTAL of Receipts This Page (option	nal)	30.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 82 / 261 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Steve E. Krebs Mailing Address 73 Tindall Rd City Robbinsville FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General	State Zip Code NJ 08691-2508 C Occupation Director, Conference Services Aggregate Year-to-Date 210.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. David P. Lavins Mailing Address 10 Fox Chase Road City Malvern	State Zip Code PA 19355	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: ☐ Primary ☐ General Other (specify) ▼	Occupation Chief Financial Officer Aggregate Year-to-Date 210.00	10.00
Full Name (Last, First, Middle Initial) Ms. Kerry A. McKean-Kelly Mailing Address 40 Imlaystown Road		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City East Windsor FEC ID number of contributing federal political committee.	State Zip Code NJ 08520-6209	Transaction ID: 18723102 Amount of Each Receipt this Period 10.00
Name of Employer New Jersey Hospital Association Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Assistant Vice President Aggregate Year-to-Date 210.00	
SUBTOTAL of Receipts This Page (optional) .		30.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 83 / 261 (check only one) X
Any information copied from such Reports or for commercial purposes, other than usi NAME OF COMMITTEE (In Full) American Hospital Association P.	ng the name and ado	v not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Randall J. Minniear Mailing Address 3901 Worthingto	n Court		Date of Receipt
City Freehold	State NJ	Zip Code 07728	Transaction ID: 18723104 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		10.00
Name of Employer New Jersey Hospital Association Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		P, Government Relations Year-to-Date 210.00	
Full Name (Last, First, Middle Initial) Ms. Joann M. Morgano Mailing Address 7 Cottonwood Dri	ve		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 18723106
Lumberton	NJ	08048-5297	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		10.00
Name of Employer New Jersey Hospital Association Receipt For: ☐ Primary ☐ General Other (specify) ▼	- ' '	Marketing & Communication Year-to-Date ▼ 110.00	ns
Full Name (Last, First, Middle Initial) Ms. Joann M. Morgano	·		Date of Receipt
Mailing Address 7 Cottonwood Dri	ve		10 29 2010
City	State	Zip Code	Transaction ID: 18723107
Lumberton FEC ID number of contributing federal political committee.	NJ C	08048-5297	Amount of Each Receipt this Period 100.00
Name of Employer New Jersey Hospital Assoc- iation Receipt For:	<u> </u>	n Marketing & Communication Year-to-Date	ns
Primary General Other (specify) ▼	Aggregate	210.00]
SUBTOTAL of Receipts This Page (option	nal)		120.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 84 / 261 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any personal part of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Barry Ostrowsky Mailing Address 448 Harding Drive City South Orange FEC ID number of contributing federal political committee. Name of Employer Saint Barnabas Health Care System Receipt For: Primary General Other (specify)	State Zip Code NJ 07079-1319 C Occupation President & COO Aggregate Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y 1 0 2 9 2 0 1 0 Transaction ID: 18723110 Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Ms. Sally Roslow Mailing Address 21 Sparrow Walk City Newtown FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For:	State Zip Code PA 18940 C Occupation VP Development & Trustee Relations	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) Full Name (Last, First, Middle Initial) Mr. Roger D. Sarao, Jr. Mailing Address 4 Poppy Lane City Howell FEC ID number of contributing federal political committee.	Aggregate Year-to-Date ▼ 210.00 State Zip Code NJ 07731-1451 C	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer New Jersey Hospital Association Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ SUBTOTAL of Receipts This Page (optional) .	VP Health Economics Aggregate Year-to-Date ▼ 210.00	520.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 85 / 261 (check only one) X			
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	nd Statements may not be sold or used by any person the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.			
Full Name (Last, First, Middle Initial) Ms. Cynthia A. Sorg Mailing Address 33 Second Street	Chaha Zin Chala	Date of Receipt 1 0 2 9 2 0 1 0			
City Hopewell FEC ID number of contributing federal political committee.	State Zip Code NJ 08525-2014	Transaction ID: 18723116 Amount of Each Receipt this Period 10.00			
Name of Employer New Jersey Hospital Association Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Assistant to President Aggregate Year-to-Date 210.00				
Full Name (Last, First, Middle Initial) Mr. Terry W Andrus Mailing Address 2000 Pepperell Par					
City	State Zip Code	1 1 0 3 2 0 1 0 Transaction ID: 18723120			
<u>Opelika</u>	AL 36801-5452	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	1000.00			
Name of Employer East Alabama Medical Cent- er	Occupation President				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00				
Full Name (Last, First, Middle Initial) Ms. Laura Grill	-	Date of Receipt			
Mailing Address 2000 Pepperell Par	•	11 03 7 2010			
City <u>Opelika</u>	State Zip Code AL 36801-5422	Transaction ID: 18723121			
FEC ID number of contributing federal political committee.	C 30001-3422	Amount of Each Receipt this Period 1000.00			
Name of Employer East Alabama Medical Cent- er	Occupation Vice President, Patient Services				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00				
SURTOTAL of Receipts This Page (options	al)	2010.00			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 86 / 261 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any person name and address of any political committee to s	for the purpose of soliciting contributions olicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Dennis Thrasher Mailing Address 2190 Springwood Drive City Auburn FEC ID number of contributing federal political committee. Name of Employer East Alabama Medical Center Receipt For: Primary General Other (specify)	State Zip Code AL 36830-7200 C Occupation Asst. Vice President/Controller Aggregate Year-to-Date 1000.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Ms. Laura W. Bell Mailing Address 8897 Tara Lane City Auburn FEC ID number of contributing federal political committee. Name of Employer East Alabama Medical Center Receipt For: Primary General Other (specify)	State Zip Code AL 36830-8247 C Occupation Asst. Vice President/ Quality Managen Aggregate Year-to-Date 1000.00	Date of Receipt M M M / D D Z 2 0 1 0 Transaction ID: 18723123 Amount of Each Receipt this Period 1000.00
Full Name (Last, First, Middle Initial) Mr John T Chittom Mailing Address 229 Lee Road City Auburn FEC ID number of contributing federal political committee. Name of Employer East Alabama Medical Center Receipt For: Primary General Other (specify)	State Zip Code AL 36802-3201 C Occupation Assistant Vice President Information S Aggregate Year-to-Date 1000.00	Date of Receipt M M M / D D D / Y Y Y Y Y 1 1 1 0 3 2 2 0 1 0 Transaction ID: 18723124 Amount of Each Receipt this Period 1000.00
SUBTOTAL of Receipts This Page (optional)	>	3000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 87 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Michael Lisenby Mailing Address 807 Laurel Street City Opelika FEC ID number of contributing federal political committee. Name of Employer East Alabama Medical Center Receipt For: Primary General Other (specify)	State Zip Code AL 36801-3519 C Occupation Chief Medical Officer Aggregate Year-to-Date 1000.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Ken Lott Mailing Address 1567 Oak Hill Circle City Auburn FEC ID number of contributing federal political committee. Name of Employer East Alabama Medical Center Receipt For:	State Zip Code AL 36832-6798 C Occupation Vice President, Operations Aggregate Year-to-Date	Date of Receipt M M / D D / Y Y Y Y Y 1 1 1 0 3 2 0 1 0 Transaction ID: 18723126 Amount of Each Receipt this Period 1000.00
Primary General Other (specify) Full Name (Last, First, Middle Initial) Mr. Stanley K Hammack Mailing Address 2451 Filligim Street City Mobile FEC ID number of contributing federal political committee. Name of Employer University of South Alaba-	1000.00 State Zip Code AL 36617-2238 C	Date of Receipt M M / D D D / Y Y Y Y Y 1 1 1 0 3 2 0 1 0 Transaction ID: 18723127 Amount of Each Receipt this Period 1000.00
oniversity of South Alaba- ma Hospitals Receipt For: Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional) .	Vice President Aggregate Year-to-Date ▼ 1000.00	3000.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 88 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or for	nformation copied from such Reports and S commercial purposes, other than using the AME OF COMMITTEE (In Full) merican Hospital Association PAC	atements may not be sold or used by any pe name and address of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
. <u>M</u> M C B	ull Name (Last, First, Middle Initial) Ir. John D Anderson lailing Address P O Box 758 ity loaz EC ID number of contributing	State Zip Code AL 35957-0758	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
N N S	ame of Employer larshall Medical Center outh ecceipt For: Primary General Other (specify)	Occupation Administrator Aggregate Year-to-Date ▼ 500.00	
B. <u>M</u>	ull Name (Last, First, Middle Initial) Irs. Cheryl M Hays, , FACHE ailing Address 8000 Alabama Highwa	y 69	Date of Receipt 1 1 0 3 2 0 1 0
C	ity	State Zip Code	Transaction ID: 18723129
<u>G</u>	Guntersville	AL 35976	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C	500.00
N N	ame of Employer larshall Medical Center	Occupation Administrator	
	orth eceipt For: Primary General Other (specify) ▼	Administrator Aggregate Year-to-Date ▼ 500.00	
	ull Name (Last, First, Middle Initial) ls. A. Elizabeth Anderson		Date of Receipt
M	ailing Address 6600 Apple Cross Driv	e North	11 03 2010
	ity	State Zip Code	Transaction ID: 18723130
_	Mobile	AL 36695-2900	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C	415.00
<u>m</u>	ame of Employer niversity of South Alaba- a Children's	Occupation Administrator	
R	eceipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 415.00	
SUE	BTOTAL of Receipts This Page (optional)		1415.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 89 / 261 (check only one) X 11a 11b 11c 12 15 16 17
or for commercial purposes, other than using	d Statements may not be sold or used by any person the name and address of any political committee to s	for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Bob Page		Date of Receipt
Mailing Address 3901 Rainbow Boule City	State Zip Code	1 1 0 5 2 0 1 0 Transaction ID: 18723180
Kansas City	KS 66160-0001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer The University of Kansas Hospital Receipt For: Primary Other (specify) ▼	Occupation Chief Executive Officer Aggregate Year-to-Date 500.00	
Full Name (Last, First, Middle Initial) Mr. Steven D Wilkinson Mailing Address	voot	Date of Receipt
Mailing Address 5721 West 119th St	reet	1 1 0 5 2 0 1 0
City	State Zip Code	Transaction ID: 18723209
Overland Park	KS 66209-3722	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Menorah Medical Center	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr Kevin Smith	I	Date of Receipt
Mailing Address 41 Highland Avenue		11 08 7 9 9 9
City	State Zip Code	Transaction ID: 18723430
Winchester	MA 01890-1496	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer Winchester Hospital	Occupation Vice President Finance & Administration	0
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional))	1150.00
TOTAL This Period (last page this line numb	<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 90 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any persor name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. James Fanale		Date of Receipt
Mailing Address 38 Longfellow Way		111 08 2010
City <u>Boylston</u>	State Zip Code MA 01505-1444	Transaction ID: 18723431
FEC ID number of contributing federal political committee.	MA 01505-1444	Amount of Each Receipt this Period 125.00
Name of Employer Jordan Hospital	Occupation SVP System Development	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	
Full Name (Last, First, Middle Initial) Ms. Andrea Holleran		Date of Receipt
Mailing Address 275 Sandwich Street		11 08 2010
City	State Zip Code	Transaction ID: 18723432
<u>Plymouth</u>	MA 02360-2183	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Jordan Hospital	Occupation VP, Strategic Planning	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	
Full Name (Last, First, Middle Initial) Mr. Joseph lannoni		Date of Receipt
Mailing Address 736 Cambridge Street		11 08 2010
City	State Zip Code	Transaction ID: 18723433
Brighton	MA 02135-4398	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Caritas St. Elizabeth's Medical Center	Occupation Chief Financial Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	225.00	
SUBTOTAL of Receipts This Page (optional)		375.00
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number of the substitution of the substi		375.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 91 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16
Ai	for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any perse e name and address of any political committee t	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Mr. Randy Doherty		Date of Receipt
	Mailing Address 250 Pond Street	7.0.1	11 08 2010
	City Braintree	State Zip Code MA 02184-5351	Transaction ID: 18723435 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	350.00
	Name of Employer Braintree Rehabilitation Hospital	Occupation Chief Executive Officer	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	350.00	
_	Full Name (Last, First, Middle Initial) Mr. Joel Rudin		Date of Receipt
	Mailing Address 3 Webster Street	M M / D D / Y Y Y Y Y 1 Y 1 1 1 0 8 2 0 1 0	
	City	State Zip Code	Transaction ID: 18723436
	Winchester	MA 01890-2117	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	350.00
	Name of Employer New England Rehabilitation Hospital	Occupation Chief Executive Officer	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	350.00	
	Full Name (Last, First, Middle Initial) Ms. Paula Minnehan		Date of Receipt
	Mailing Address 283 Gallopiny Hill Ro	ad	1 1 0 8 2 0 1 0
	City	State Zip Code	Transaction ID: 18723437
	Hopkinton FEC ID number of contributing federal political committee.	NH 03229-3402	Amount of Each Receipt this Period 30.00
	Name of Employer New Hampshire Hospital As-	Occupation	
	sociation Receipt For:	V.P., Finance and Rural Hospitals Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	210.00	
			730.00

Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any persor he name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Steve M. Ahnen Mailing Address 125 Airport Road		Date of Receipt 1 1 0 8 2 0 1 0
City	State Zip Code	Transaction ID: 18723438
Concord FEC ID number of contributing federal political committee.	NH 03301-7300	Amount of Each Receipt this Period 83.33
Name of Employer New Hampshire Hospital Association Receipt For: Primary General Other (specify)	Occupation President and CEO Aggregate Year-to-Date ▼ 583.35	_
Full Name (Last, First, Middle Initial) Ms. Jena Hausmann Mailing Address 1056 East 19th Ave	nue	Date of Receipt
City	State Zip Code	1 1 0 8 2 0 1 0 Transaction ID: 18723444
Denver	CO 80218-1007	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Children's Hospital, The	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Peter Adler	 	Date of Receipt
Mailing Address 14432 SE Eastgate	Way, Ste. 300	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Bellevue	State Zip Code WA 98007-6493	Transaction ID: 18724818
FEC ID number of contributing federal political committee.	C 90007-0493	Amount of Each Receipt this Period 250.00
Name of Employer PeaceHealth	Occupation Sr. VP, Strategy & Innovation	-
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional		583.33

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SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 93 / 261
ITEMIZED RECEIPTS	for each category of the	(check only one)
TI EIMIZED TIEGEII 13	Detailed Summary Page	X 11a 11b 11c 12
Anninformation conicd from such Departs and City	to an automatic and the sould are used by a survey	13 14 15 16 17
Any information copied from such Reports and Sta or for commercial purposes, other than using the n	itements may not be sold or used by any perso name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) A. Dr. Andrew Agwunobi, , M.D.		Date of Receipt
Mailing Address P O Box 2555		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18724819
Spokane	WA 99220-2555	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Providence Sacred Heart	Occupation	-
Medical Center	Senior Vice President, CFO, CIO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) B. Ms Suzanne Anderson		Date of Receipt
Mailing Address 1100 Ninth Avenue		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18724820
Seattle	WA 98101-2756	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Virginia Mason Medical Ce- nter	Occupation Senior VP, CFO, CIO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) C. Mr. Michael Carter		Date of Receipt
Mailing Address 747 Broadway Avenue		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18724821
<u>Seattle</u>	WA 98122-4379	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Swedish Health Services	Occupation Sr. Vice President & CAO, Edmonds	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)	>	750.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 94 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American Hospital Association Page 1	and Statements may not be sold or used by any person ng the name and address of any political committee to s	for the purpose of soliciting contributions olicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Patricia Cochrell		Date of Receipt
Mailing Address 23986 Vinland Te	err NW	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18724822
Poulsbo	WA 98370-9416	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Harrison Medical Center	Occupation Executive VP/ Chief Operation Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Jeff Collins		Date of Receipt
Mailing Address 101 West Eighth	Avenue	11 09 2010
City	State Zip Code	Transaction ID: 18724823
Spokane	WA 99204-2307	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Providence Sacred Heart Medical Center	Occupation Chief Medical Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Sandra Dahl		Date of Receipt
Mailing Address 5502 Webster Av	enue	1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City <u>Yakima</u>	State Zip Code WA 98908-3698	Transaction ID: 18724824 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Yakima Valley Memorial Ho- spital	Occupation Vice President, Nursing & Patient Care	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optio	nal)	750.00

ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 95 / 261 (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	and Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PA	C		
Full Name (Last, First, Middle Initial) Mr. Stuart Hennessey			Date of Receipt
Mailing Address 14432 SE Eastgate	e Way, Ste 300		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Bellingham	State WA	Zip Code 98007-6412	Transaction ID: 18724825 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30007 0412	250.00
Name of Employer PeaceHealth	Occupation Senior Vi	n ice President Legal Services	a
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Glenn Kasman	I		Date of Receipt
Mailing Address 315 Martin Luther	King Jr. Way		11 09 YYYY 2010
City	State	Zip Code	Transaction ID: 18724829
Tacoma FEC ID number of contributing federal political committee.	C	98405-4234	Amount of Each Receipt this Period 250.00
Name of Employer MultiCare Health System	Occupation Vice Pres	n sident Professional Services	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Thomas Kruse			Date of Receipt
Mailing Address 6860 NW Ranger V	Way		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Silverdale	State WA	Zip Code 98383-6306	Transaction ID: 18724830 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	90505-0500	250.00
Name of Employer Harrison Medical Center	Occupation Vice Pres		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (options	al)		750.00

A.

В.

C.

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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 96 / 261
ITEMIZED RECEIPTS		for each category of the	(check only one)
II EIVIIZED NEGEIP 13		Detailed Summary Page	X 11a 11b 11c 12
			13 14 15 16 17
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. Mark May			Date of Receipt
Mailing Address P O Box 2555			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 18724831
Spokane	WA	99220-2555	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Providence Sacred Heart Medical Center	Occupatio Chief Inte	n egration Officer	
Receipt For:		e Year-to-Date ▼	
Primary General	33 3		1
Other (specify) ▼	0 0	250.00	
Full Name (Last, First, Middle Initial) Mr. Russell M. Myers			Date of Receipt
Mailing Address 2908 Shelton Avenue			11 09 2010
City	State	Zip Code	Transaction ID: 18724832
Yakima	WA	98902-4073	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Yakima Valley Memorial Ho- spital	Occupatio Vice Pres		
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		250.00	
Full Name (Last, First, Middle Initial) Mr. Cliff Robertson			Date of Receipt
Mailing Address 2505 Cliffside Ln. NW	#P102		1 1 0 9 2 0 1 0
City	State	Zip Code	Transaction ID: 18724833
Gig Harbor	WA	98335-1695	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Franciscan Health System	Occupatio Presiden	n t and CMO - Medical Group	
Receipt For:		e Year-to-Date ▼	
Primary General	33 - 3 - 1		1
Other (specify) ▼	0 0	250.00]
SUBTOTAL of Receipts This Page (optional)			750.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 97 / 261 (check only one) X 11a 11b 11c 12 15 16 17
	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sold or used by any person name and address of any political committee to s	for the purpose of soliciting contributions solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) Mr Leon Smith Mailing Address 2520 Cherry Avenue City	State Zip Code	Date of Receipt M
	Bremerton FEC ID number of contributing federal political committee.	WA 98310-4229	Amount of Each Receipt this Period 300.00
	Name of Employer Harrison Medical Center Receipt For: Primary General Other (specify) ▼	Occupation Board Member Aggregate Year-to-Date 300.00	
В.	Full Name (Last, First, Middle Initial) Mr. Thomas W Wilbur Mailing Address 714 West Pine Street		Date of Receipt 1 1 0 9 2 0 1 0
	City Newport FEC ID number of contributing	State Zip Code WA 99156-9046	Transaction ID: 18724839 Amount of Each Receipt this Period 375.00
	Name of Employer Newport Hospital and Heal- th Services Receipt For: Primary General Other (specify)	Occupation Chief Executive Officer and Superinter Aggregate Year-to-Date ▼ 375.00	_
-).	Full Name (Last, First, Middle Initial) Mr. Scott E. Armstrong Mailing Address 3855 44th Avenue NE		Date of Receipt
	City Seattle FEC ID number of contributing	State Zip Code WA 98105-5448	Transaction ID: 18724840 Amount of Each Receipt this Period
	federal political committee. Name of Employer Group Health Eastside Hospital	Occupation Chief Executive Officer	500.00
	Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)		1175.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 98 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 11
,	Any information copied from such Reports and Sor for commercial purposes, other than using the	tatements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
	Full Name (Last, First, Middle Initial) Ms. Elaine Couture			Date of Receipt
	Mailing Address 101 West Eighth Avenu			11 09 2010
	City	State	Zip Code	Transaction ID: 18724841
	Spokane FEC ID number of contributing	WA	99204-2307	Amount of Each Receipt this Period
	federal political committee.	C		500.00
	Name of Employer Providence Sacred Heart	Occupation	n erating Officer	
	Medical Center Receipt For:		e Year-to-Date ▼	
	Primary General Other (specify) ▼	Aggregate	500.00	
. -	Full Name (Last, First, Middle Initial) Mr. Dan Dixon			Date of Receipt
	Mailing Address 747 Broadway Avenue	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: 18724842
	<u>Seattle</u>	WA	98122-4379	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Swedish Health Services	Occupation Vice Pres	n sident External Affairs	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
_	Full Name (Last, First, Middle Initial) Mr. Harold S Geller			Date of Receipt
	Mailing Address 315 North 14th Street			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 18724844
	Othello	WA	99344-1297	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Othello Community Hospital	Occupation Administ		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
Γ	SURTOTAL of Receipts This Page (antional)	<u> </u>		1500.00
-	SUBTOTAL of Receipts This Page (optional)		······	
	TOTAL This Period (last page this line number	only))	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 99 / 261 (check only one) X
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions
	Full Name (Last, First, Middle Initial) Mr. Dan Harris			Date of Receipt
	Mailing Address 2934 Westside Drive N City	State	Zip Code	1 1 0 9 2 0 1 0 Transaction ID: 18724845
	Olympia FEC ID number of contributing federal political committee.	C	98502-3277	Amount of Each Receipt this Period 500.00
	Name of Employer Providence Health System Receipt For:	. '	nancial Officer	_
	Primary General Other (specify)	7.99.094.0	500.00	
	Full Name (Last, First, Middle Initial) Mr. James Hereford Mailing Address 201 16th Avenue East	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: 18724846
	Seattle	WA	98112-5226	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Group Health Cooperative/- Central Hosp Receipt For:	. '	e Vice President	
	Primary General Other (specify) ▼	Aggregate	e Year-to-Date 500.00	
_	Full Name (Last, First, Middle Initial) Mr. Marcel C Loh, , FACHE			Date of Receipt
	Mailing Address 500 17th Avenue	11 09 2010		
	City	State	Zip Code	Transaction ID: 18724847
	Seattle FEC ID number of contributing federal political committee.	C	98124-5711	Amount of Each Receipt this Period 500.00
	Name of Employer Swedish Medical Center-Ch- erry Hill Cam Receipt For:		n ice President and Chief Admi e Year-to-Date ▼	ni
	Primary General Other (specify) ▼	Aggregate	500.00	
	SUBTOTAL of Receipts This Page (optional)		·····	1500.00
	TOTAL This Period (last page this line number	only)	>	

Any information copied from such Reports and Statements or for commercial purposes, other than using the name and NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Dr. Gregory D. Sawyer, MD, PhD. Mailing Address 11503 Sara Loop Road City State Yakima WA	address of any political committee to	Date of Receipt Date of Receipt 1 2 0 1 0 9 2 0 1 0
American Hospital Association PAC Full Name (Last, First, Middle Initial) Dr. Gregory D. Sawyer, MD, PhD. Mailing Address 11503 Sara Loop Road City State	·	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Dr. Gregory D. Sawyer, MD, PhD. Mailing Address 11503 Sara Loop Road City State	·	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State	·	11 09 2010
	·	I ransaction ID: 10/24040
		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		500.00
Spital	ation or, Organizational Health Willne gate Year-to-Date ▼ 500.00	<u> </u>
Full Name (Last, First, Middle Initial) Mr. Jon D Smiley		Date of Receipt
Mailing Address P O Box 719		1 1 0 9 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State	Zip Code	Transaction ID: 18724850
<u>Sunnyside</u> WA	98944-0719	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		500.00
Name of Employer Sunnyside Community Hospital Occupa Chief	ation Executive Officer	
Receipt For: Primary General Other (specify)	gate Year-to-Date 500.00	
Full Name (Last, First, Middle Initial) Mr. John Wallen		Date of Receipt
Mailing Address 2520 Cherry Avenue	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City State	Zip Code	Transaction ID: 18724851
Bremerton WA	98310-4229	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		500.00
Name of Employer Harrison Medical Center Coccupa Truste		7
	gate Year-to-Date V	
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)		1500.00
TOTAL This Period (last page this line number only)	<u> </u>	

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 101 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16	
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any per ne name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.	
Full Name (Last, First, Middle Initial) Mr. Alan R Yordy Mailing Address 14432 SE Eastgate		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City <u>Bellevue</u>	State Zip Code WA 98007-6493	Transaction ID: 18724852	
FEC ID number of contributing federal political committee.	C 98007-0493	Amount of Each Receipt this Period 500.00	
Name of Employer PeaceHealth Receipt For: Primary General Other (specify)	Occupation President and Chief Mission Officer Aggregate Year-to-Date 500.00		
Full Name (Last, First, Middle Initial) Mr. Thomas Corley Mailing Address North 5633 Lidgerwo	od Street	Date of Receipt 1 1 0 9 2 0 1 0	
City	State Zip Code	Transaction ID: 18724853	
Spokane	WA 99208-1224	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С	250.00	
Name of Employer Providence Sacred Heart Medical Center Receipt For: Primary General Other (specify) ▼	Occupation Chief Operating Officer Aggregate Year-to-Date 250.00		
Full Name (Last, First, Middle Initial) Mr. James M. Blazar			
Mailing Address 69 Orchard Rd		1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City West Hartford	State Zip Code CT 06117-2911	Transaction ID: 18724857 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	500.00	
Name of Employer Hartford Hospital	Occupation SVP & Chief Strategy Officer		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		
CURTOTAL of Descripts This Descriptional		1250.00	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 102 / 261 (check only one) X	
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.	
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. Elliot Joseph		Date of Receipt	
Mailing Address 3 Sunningdale	Otata 7:n Oada	1 1 D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City Farmington	State Zip Code CT 06032-1460	Transaction ID: 18724858 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	1000.00	
Name of Employer Hartford Hospital	Occupation President & Chief Executive Officer		
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00		
Full Name (Last, First, Middle Initial) Mr. Anthony A Armada		Date of Receipt	
Mailing Address 1775 Dempster Street	11 09 2010		
City	State Zip Code	Transaction ID: 18725489	
Park Ridge	IL 60068-1143	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	500.00	
Name of Employer Advocate Lutheran General Hospital	Occupation President		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		
Full Name (Last, First, Middle Initial) Ms. Darcie J. Brazel		Date of Receipt	
Mailing Address 11654 Logan Court			
City <u>Orland Park</u>	State Zip Code IL 60467-6824	Transaction ID: 18725490	
FEC ID number of contributing federal political committee.	C 00407-0024	Amount of Each Receipt this Period 150.00	
Name of Employer Advocate Christ Medical Center	Occupation Chief Nurse Executive		
Receipt For:	Aggregate Year-to-Date ▼		
Primary General Other (specify) ▼	290.00		
SUBTOTAL of Receipts This Page (optional)		1650.00	
TOTAL This Period (last page this line number	<u> </u>		

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 103 / 261 (check only one)
Any information copied from such Reports and or for commercial purposes, other than using the such as	d Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAC		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Full Name (Last, First, Middle Initial) Mr. Timothy J. Eckels			Date of Receipt
Mailing Address 33 Oak Lane	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City Springfield	State IL	Zip Code 62712-8611	Transaction ID: 18725494 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	02712-0011	500.00
Name of Employer Hospital Sisters Health System Receipt For:	Occupatio Vice Pres		
Primary General Other (specify) ▼	99.59	500.00	
Full Name (Last, First, Middle Initial) Mr. Thomas Lubotsky	•		Date of Receipt
Mailing Address 6658 Winston Lane	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	State OH	Zip Code	Transaction ID: 18725498
Solon FEC ID number of contributing federal political committee.	C	44139-4694	Amount of Each Receipt this Period 500.00
Name of Employer Advocate Health Care	Occupatio Vice Pres		
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial)			
Mr. Kevin P Poorten Mailing Address P O Box 707			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City Dekalb	State IL	Zip Code 60115-0707	Transaction ID: 18725518
FEC ID number of contributing federal political committee.	C	60113-0707	Amount of Each Receipt this Period 250.00
Name of Employer Kish Health System	Occupatio Presiden	n t and Chief Executive Office	
Receipt For: Primary General Other (specify) ▼	- 	e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	I))	1250.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 104 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16		
Any information copied from such Reports are or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAGE	nd Statements may not be sold or used by any person the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.		
Full Name (Last, First, Middle Initial) Mr. Robert C Schmitt, II Mailing Address P O Box 429 City	State Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Gibson City FEC ID number of contributing federal political committee.	IL 60936-0429	Amount of Each Receipt this Period 500.00		
Name of Employer Gibson Area Hospital and Health Servic Receipt For: Primary General Other (specify) ▼	Occupation Chief Executive Officer Aggregate Year-to-Date 500.00			
Full Name (Last, First, Middle Initial) Dr. Steven Strongwater, , M.D. Mailing Address State University of	New York	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	State Zip Code	Transaction ID: 18725538		
Stony Brook	NY 11794-0001	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	500.00		
Name of Employer Stony Brook University Medical Center Receipt For: Primary Other (specify) ▼	Occupation President and Chief Executive Officer Aggregate Year-to-Date 500.00]		
Full Name (Last, First, Middle Initial) Mr. Thomas G Bartlett, III, M.D. Mailing Address 25117 Highway 15	•	Date of Receipt		
	Mailing Address 25117 Highway 15			
City	State Zip Code	Transaction ID: 18726388		
Union FEC ID number of contributing federal political committee.	MS 39365-9088	Amount of Each Receipt this Period 25.00		
Name of Employer Laird Hospital	Occupation Administrator			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 305.00			
SUBTOTAL of Receipts This Page (optional	n	1025.00		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 105 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 17
\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements ma name and ad	y not be sold or used by any persondress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ 4 .	Full Name (Last, First, Middle Initial) Mr. Larry C. Bourne Mailing Address 424 Autumn Oak Drive			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
	City Madison	State MS	Zip Code 39110-9148	Transaction ID: 18726393
	FEC ID number of contributing federal political committee.	C	39110-9140	Amount of Each Receipt this Period 25.00
	Name of Employer HPI Company Receipt For:		on nt and CEO e Year-to-Date ▼	
	Primary General Other (specify) ▼	39. 394.	280.00	
- 3.	Full Name (Last, First, Middle Initial) Mr. Sam W. Cameron Mailing Address 28 Waterford Place			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 18726399
	Jackson FEC ID number of contributing federal political committee.	MS C	39211-2945	Amount of Each Receipt this Period 152.50
	Name of Employer Mississippi Hospital Asso- ciation Receipt For:		t & Chief Executive Officer	
	Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1112.50]
- :.	Full Name (Last, First, Middle Initial) Mr. Charles L Denton			Date of Receipt
	Mailing Address 960 Avent Drive	11 09 2010		
	City Grenada	State MS	Zip Code 38901-5230	Transaction ID: 18726406 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		187.50
	Name of Employer Grenada Lake Medical Cent- er	Occupation Chief Ex	ecutive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 877.50	
	SUBTOTAL of Receipts This Page (optional)			365.00
ı	TOTAL This Period (last page this line number of			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 106 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Michael R. Edwards Mailing Address Post Office Box 259 City Morton FEC ID number of contributing federal political committee. Name of Employer Scott Regional Hospital Receipt For: Primary General Other (specify)	State Zip Code MS 39117-0259 C Occupation Chief Executive Officer Aggregate Year-to-Date 285.00	Date of Receipt M M M / D D / Y Y Y Y Y 1 1 1 0 9 2 2 0 1 0 Transaction ID: 18726409 Amount of Each Receipt this Period 20.00
Full Name (Last, First, Middle Initial) Mr. Richard G Hilton Mailing Address Drawer 1506 City Starkville FEC ID number of contributing federal political committee. Name of Employer OCH Regional Medical Center Receipt For: Primary General Other (specify)	State Zip Code MS 39760-1506 C Occupation Associate Administrator and Chief Fir Aggregate Year-to-Date 320.00	Date of Receipt M M / D D D / Y Y Y Y Y 1 1 1 0 9 2 2 0 1 0 Transaction ID: 18726424 Amount of Each Receipt this Period 100.00
Full Name (Last, First, Middle Initial) Mr. Randy King Mailing Address 7601 Southcrest Park City Southaven FEC ID number of contributing federal political committee. Name of Employer Baptist Memorial Hospital-Desoto Receipt For: Primary General Other (specify)	State Zip Code MS 38671-4739 C Occupation Chief Executive Officer Aggregate Year-to-Date 360.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) .	>	220.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 107 / 261 (check only one) X
or for	information copied from such Reports and St r commercial purposes, other than using the AME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
4. <u>№</u>	ull Name (Last, First, Middle Initial) Ir. Steve Lesley lailing Address 116 Woodgreen Crossi	ina		Date of Receipt
C	ity	State	Zip Code	1 1 0 9 2 0 1 0 Transaction ID: 18726434
F	Madison EC ID number of contributing sderal political committee.	MS C	39130-1909	Amount of Each Receipt this Period 38.34
<u>C</u>	ame of Employer flississippi Hospital Asso- lation eceipt For: Primary General Other (specify) ▼		of Data Services Year-to-Date ▼ 230.06	
8. <u>N</u>	ull Name (Last, First, Middle Initial) Ir. Robert Mobley Iailing Address 969 Lakeland Drive			Date of Receipt
C	ity	State	Zip Code	1 1 0 9 2 0 1 0 Transaction ID: 18726441
F	ackson EC ID number of contributing aderal political committee.	MS C	39216-4606	Amount of Each Receipt this Period 212.50
S <u>ia</u>	ame of Employer it. Dominic-Jackson Memor- al Hospital eceipt For: Primary General Other (specify) ▼	Occupation Medical I Aggregate		
. <u>N</u>	ull Name (Last, First, Middle Initial) Ir. Timothy H Moore lailing Address 1314 19th Avenue			Date of Receipt
_	ity	11 09 2010		
	Meridian	State MS	Zip Code 39301-4116	Transaction ID: 18726442 Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C		15.00
N R	ame of Employer lush Foundation Hospital	Occupation Administr		
R	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 282.50	
SUE	BTOTAL of Receipts This Page (optional)			265.84

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 108 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 1
A OI	ny information copied from such Reports and Stror commercial purposes, other than using the	Statements may no e name and addre	ot be sold or used by any pers ss of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
	Full Name (Last, First, Middle Initial) Mr. Rick Napper			Date of Receipt
	Mailing Address 100 Covewood Lane			11 09 2010
	City Corinth	State MS	Zip Code 38834-7200	Transaction ID: 18726444 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Magnolia Regional Health Center	Occupation CEO		
	Receipt For: Primary General	Aggregate Ye	ear-to-Date ▼	
	Other (specify)		500.00	
	Full Name (Last, First, Middle Initial) Mr. James Angle	·		Date of Receipt
	Mailing Address 1176 Lake Point Cove	11 12 2010		
	City	State	Zip Code	Transaction ID: 18726471
	Pittsgrove	NJ	08318-9184	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Memorial Hospital of Salem County	Occupation CEO		
	Receipt For:	Aggregate Ye	ear-to-Date ▼	
	Primary General Other (specify) ▼	0 0 0	500.00	
	Full Name (Last, First, Middle Initial) Mr. Thomas A Biga	I		Date of Receipt
	Mailing Address 29 Highand Avenue			1 1 1 2 2 0 1 0
	City	State	Zip Code	Transaction ID: 18726474
	Fair Haven	NJ	07704-3620	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Saint Barnabas Health Care System	Occupation Executive D		
	Receipt For: Primary General	Aggregate Ye	ear-to-Date ▼	7
	Other (specify)		1000.00	
	SUBTOTAL of Receipts This Page (optional) .			1250.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 109 / 261 (check only one) X
Any information copied from such Report or for commercial purposes, other than use NAME OF COMMITTEE (In Full) American Hospital Association	is and Statements may not be sold or used by any personsing the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. John A Brennan, , M.D. Mailing Address 3 Castle Court City	State Zip Code	Date of Receipt 1 1 1 2 2 0 1 0 Transaction ID: 18726476
Randolph FEC ID number of contributing federal political committee.	NJ 07869-2022	Amount of Each Receipt this Period 500.00
Name of Employer Newark Beth Israel Medical Center Receipt For: Primary General Other (specify) ▼	Occupation Executive Director Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Mr. Joseph A. Carr Mailing Address 2378 Orchard C	rest Blvd.	Date of Receipt
City	State Zip Code	Transaction ID: 18726477
Manasquan	NJ 08736-4001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer New Jersey Hospital Assoc- iation	Occupation Chief Information Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	
Full Name (Last, First, Middle Initial) Ms. Jessica Cohen Mailing Address 760 Alexander F	Road	Date of Receipt 1 1 1 2 2 0 1 0
City	State Zip Code	Transaction ID: 18726479
Princeton FEC ID number of contributing federal political committee.	NJ 08540-6305	Amount of Each Receipt this Period 5.00
Name of Employer New Jersey Hospital Assoc- iation	Occupation Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00	
SUBTOTAL of Receipts This Page (op:	ional)	515.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 110 / 261 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any perse name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Belinda Brown Cooper Mailing Address 121 Clear Creek Road City	I State Zip Code	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Langhorne FEC ID number of contributing federal political committee.	PA 19047	Amount of Each Receipt this Period 10.00
Name of Employer New Jersey Hospital Association Receipt For: ☐ Primary ☐ General Other (specify) ▼	Occupation Vice President, Human Resources Aggregate Year-to-Date ▼ 220.00	
Full Name (Last, First, Middle Initial) Mr. Joseph P Coyle Mailing Address 46 Cypress Lane		Date of Receipt
City West Creek	State Zip Code NJ 08092-2839	Transaction ID: 18726481 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Southern Ocean County Hos- pital Receipt For: Primary General Other (specify) ▼	Occupation President and Chief Executive Office Aggregate Year-to-Date 1000.00	er .
Full Name (Last, First, Middle Initial) Ms. Mary A. Ditri		Date of Receipt
Mailing Address 9 Jumping Brook Driv	9	11 / D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City <u>Neptune</u>	State Zip Code NJ 07753-3326	Transaction ID: 18726483 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer New Jersey Hospital Assoc- iation	Occupation Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	
CURTOTAL of Positive This Poss (self-self)		520.00

City Livingston FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association In Seceipt For: Primary General Other (specify) FEC ID number of contributing federal political committee. Primary General Other (specify) Full Name (Last, First, Middle Initial) Mr. Leslie D Hirsch, FACHE Mailing Address 28 Meckenzie Lane N. City State Zip Code NJ 07834-2954 FEC ID number of contributing federal political committee. Name of Employer Saint Clare's Hospital Fec ID number of contributing federal political committee. Name of Employer Saint Clare's Hospital Fec ID number of contributing Federal political committee. Name of Employer Saint Clare's Hospital Fecipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Sean J. Hopkins Mailing Address 6180 Lower Mountain Road City State Zip Code Transaction ID: 18726489 Date of Receipt Milling Address 6180 Lower Mountain Road Transaction ID: 18726491 Amount of Each Receipt This Period Transaction ID: 18726491 Amount of Each Receipt Transaction ID: 18726491		SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 111 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 17
A. Ms. Theresa L. Edelstein Mailling Address 27 Harvest Lane City State Zip Code Livingston NJ 07039-2750 FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Primary General Other (specify) ▼		or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Livingston NJ 07039-2750 FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify) ▼	A .	Ms. Theresa L. Edelstein Mailing Address 27 Harvest Lane	State	Zip Code	1 1 1 2 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For:		Livingston FEC ID number of contributing		07039-2750	
Mailing Address 28 Meckenzie Lane N. City State Zip Code Denville NJ 07834-2954 FEC ID number of contributing federal political committee. Name of Employer Saint Clare's Hospital Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) City State Zip Code NJ 07834-2954 Amount of Each Receipt this Period Force Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) City State Zip Code PA 18938 FEC ID number of contributing federal political committee. Date of Receipt Transaction ID: 18726489 Amount of Each Receipt this Period Transaction ID: 18726489 Date of Receipt Transaction ID: 18726489		iation Receipt For: Primary General	Vice Pre	sident Continuing Care Servi e Year-to-Date ▼ 420.00	ice
City State Zip Code NJ 07834-2954 FEC ID number of contributing federal political committee. Name of Employer Saint Clare's Hospital Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Sean J. Hopkins Mailing Address 6180 Lower Mountain Road FEC ID number of contributing federal political committee. City State Zip Code New Hope PA 18938 FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Name of Employer New Jersey Hospital Association Receipt For: Primary General Occupation Sr. VP., Health Economics Aggregate Year-to-Date ▼ 1000.00 Transaction ID: 18726491 Transaction ID: 18726491 Amount of Each Receipt this Period Transaction ID: 18726491 Amount of Each Receipt this Period	3.	Mr. Leslie D Hirsch, , FACHE			M M / D D / Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Saint Clare's Hospital Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Sean J. Hopkins Mailing Address 6180 Lower Mountain Road City State Zip Code New Hope PA 18938 FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General Occupation Sr. VP., Health Economics Aggregate Year-to-Date ▼ Soundary State Sip Code Transaction ID: 18726491 Amount of Each Receipt this Period Soundary State Sip Code Transaction ID: 18726491 Amount of Each Receipt this Period Soundary State Sip Code Transaction ID: 18726491 Amount of Each Receipt this Period Soundary State Sip Code Transaction ID: 18726491 Amount of Each Receipt this Period Soundary State Sip Code Transaction ID: 18726491 Amount of Each Receipt this Period Soundary State Sip Code Transaction ID: 18726491 Amount of Each Receipt this Period Soundary State Sip Code Transaction ID: 18726491 Amount of Each Receipt this Period Soundary State Sip Code Transaction ID: 18726491 Amount of Each Receipt this Period Soundary State Sip Code Transaction ID: 18726491 Amount of Each Receipt this Period Soundary State Sip Code Transaction ID: 18726491 Amount of Each Receipt this Period Soundary State Sip Code Transaction ID: 18726491 Amount of Each Receipt this Period Soundary State Sip Code Transaction ID: 18726491 Amount of Each Receipt this Period Soundary State Sip Code Transaction ID: 18726491 Transaction ID: 18726491		City	State	Zip Code	
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iation Receipt For: Primary General Aggregate Year-to-Date Aggregate Year-to-Date Aggregate Year-to-Date		FEC ID number of contributing		18938	Amount of Each Receipt this Period 5.00
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		Primary General	Aggregate		
SUBTOTAL of Receipts This Page (optional)		SUBTOTAL of Receipts This Page (optional)			515.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 112 / 261 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Gary S Horan, , FACHE Mailing Address 225 Williamson Street City Elizabeth FEC ID number of contributing federal political committee. Name of Employer Trinitas Regional Medical Center Receipt For: Primary General	State Zip Code NJ 07202-3625 C Occupation President and Chief Executive Office Aggregate Year-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y 1 1 2 2 0 1 0 Transaction ID: 18726492 Amount of Each Receipt this Period 500.00
Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Fredrick J. Jacobs Mailing Address 23 E. Delaware Avenue City Pennington FEC ID number of contributing	State Zip Code NJ 08534-2302	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer New Jersey Hospital Association Receipt For: ☐ Primary ☐ General Other (specify) ▼	Occupation General Counsel Aggregate Year-to-Date 220.00]
Full Name (Last, First, Middle Initial) Mr. Chester B. Kaletkowski Mailing Address 23 Winding Way City	State Zip Code	Date of Receipt M M D D Y Y Y Y Y Y Y
Mullica Hill FEC ID number of contributing federal political committee.	NJ 08062-2511	Amount of Each Receipt this Period 500.00
Name of Employer South Jersey Healthcare Receipt For: Primary General Other (specify) ▼	Occupation President and Chief Executive Office Aggregate Year-to-Date 500.00	
SUBTOTAL of Receipts This Page (optional)		1010.00

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit confributions from such committee. NAME OF COMMITTEE (in Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Richard J Kathrins Malling Address 1442 Sauvignon Drive City State Zip Code Toms River NJ 08753-2763 FEC ID number of contributing federal political committee. Name of Employer Rehabilitation Recept For: Primary General Other (specify) ▼ State Zip Code PA 19355 FEC ID number of contributing federal political committee. City State Zip Code Phanage State State North Valley Road City State Zip Code Phanage State Sta	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate sche for each category Detailed Summary	of the
Mailing Address 1442 Sauvignon Drive City State Zip Code Transaction ID: 18726495 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C C Cocupation Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. William D. Kennedy Mailing Address 1549 North Valley Road City State Zip Code Malvern FEC ID number of contributing federal political committee. C C State Zip Code Malvern FEC ID number of contributing federal political committee. C C C C C C C C C C C C C C C C C C C	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may not be sold or used to name and address of any political c	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
FEC ID number of contributing federal political committee. Name of Employer Bachtarach institute for Bachtarach institute for Bachtarach institute for Rehabilitation President and Chief Executive Officer Rehabilitation President and Chief Executive Officer Rehabilitation President and Chief Executive Officer Aggregate Year-to-Date ▼	Mr. Richard J Kathrins Mailing Address 1442 Sauvignon Drive City		M M / D D / Y Y Y Y Y Y 1 1 1 1 2 2 0 1 0
Receipt For:	FEC ID number of contributing		
Mr. William D. Kennedy Mailing Address 1549 North Valley Road City State Zip Code PA 19355 FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Riccipt For: Primary General Other (specify) ▼ State Zip Code Date of Receipt For: Primary General Other (specify) ▼ State Zip Code Barnegat NJ 08005-2174 FEC ID number of contributing federal political committee. Date of Receipt For: Date of Receipt Name (Last, First, Middle Initial) Nr. Timothy J. Keough	Rehabilitation Receipt For: Primary General	President and Chief Execut Aggregate Year-to-Date ▼ 5	500.00
City Malvern PA 19355 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify) ▼ State Zip Code PA 19355 Amount of Each Receipt this Period 10.00 Coccupation Senior Vice President Aggregate Year-to-Date ▼ 10.00 Date of Receipt Transaction ID: 18726496 Amount of Each Receipt this Period Date of Receipt Transaction ID: 18726498 Date of Receipt Transaction ID: 18726498 Amount of Each Receipt this Period Date of Receipt Transaction ID: 18726498 Amount of Each Receipt this Period Date of Receipt Transaction ID: 18726498 Amount of Each Receipt this Period Transaction ID: 18726498 Amount of Each Receipt this Period C Occupation Vice President, Health Information Mgm Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼	Mr. William D. Kennedy	d	M ' M / D ' D / Y ' Y ' Y ' Y
Malvern PA 19355 FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify) ▼	City	State Zip Code	
Name of Employer New Jersey Hospital Association Senior Vice President	Malvern	PA 19355	Amount of Each Receipt this Period
New Jersey Hospital Association Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Timothy J. Keough Mailing Address 23 Nelson Drive City State Zip Code Barnegat NJ 08005-2174 FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt Transaction ID: 18726498 Amount of Each Receipt this Period C 10.00 Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ 10.00 FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼		C	10.00
Primary General Other (specify) ▼ Pull Name (Last, First, Middle Initial) Mr. Timothy J. Keough Mailing Address 23 Nelson Drive City Barnegat Barnegat FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify) ▼	New Jersey Hośpital Assoc- iation	Senior Vice President	
Mr. Timothy J. Keough Mailing Address 23 Nelson Drive City State Zip Code Barnegat NJ 08005-2174 FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt Transaction ID: 18726498 Amount of Each Receipt this Period 10.00 Cccupation Vice President, Health Information Mgm Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼	Primary General		220.00
City Barnegat NJ 08005-2174 FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary Other (specify) ▼ State Zip Code NJ 08005-2174 C 11 12 2010 Transaction ID: 18726498 Amount of Each Receipt this Period 10.00 C 10.00			Date of Receipt
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Name of Employer New Jersey Hospital Association Receipt For: Primary Other (specify) ▼ Occupation Vice President, Health Information Mgm Aggregate Year-to-Date 220.00		NJ 08005-2174	Amount of Each Receipt this Period
iation Receipt For: Primary Other (specify) Other (specify) Aggregate Year-to-Date 220.00		C	10.00
Primary General Other (specify) ▼ 220.00	iation	Vice President, Health Info	rmation Mgm
SUPTOTAL of Pagainta This Paga (antional)	Primary General		220.00
SUBTOTAL of neceipts Trils rage (optional)	SUBTOTAL of Receipts This Page (optional)		520.00

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 114 / 261 (check only one) X
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any perse name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Steve E. Krebs Mailing Address 73 Tindall Rd City Robbinsville FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General	State Zip Code NJ 08691-2508 C Occupation Director, Conference Services Aggregate Year-to-Date ▼	Date of Receipt M M M
Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. David P. Lavins Mailing Address 10 Fox Chase Road City	State Zip Code	Date of Receipt M
Malvern FEC ID number of contributing federal political committee.	PA 19355	Amount of Each Receipt this Period
Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify)	Occupation Chief Financial Officer Aggregate Year-to-Date 220.00	
Full Name (Last, First, Middle Initial) Mr. Alan Lieber Mailing Address 4 Sun Watch Court		Date of Receipt
City Ramsey	State Zip Code NJ 07446-2123	Transaction ID: 18726502 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Atlantic Health	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		520.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate sche for each category o Detailed Summary	of the
7	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sold or used b name and address of any political co	y any person for the purpose of soliciting contributions ommittee to solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Mr. John K Lloyd Mailing Address 11 Mohawk Avenue City Oceanport FEC ID number of contributing federal political committee. Name of Employer Meridian Health	State Zip Code NJ 07757-1619 C Occupation President and Chief Executi	Date of Receipt M M M / D D D / Y Y Y Y Y 1 1 1 2 2 2 0 1 0 Transaction ID: 18726503 Amount of Each Receipt this Period 500.00
_	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	00.00
В.	Full Name (Last, First, Middle Initial) Ms. Amy B Mansue Mailing Address 17 Powell Court		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
	City Hightstown FEC ID number of contributing federal political committee. Name of Employer	State Zip Code NJ 08520-3014 C Occupation	Amount of Each Receipt this Period 781.50
	Children's Specialized Hospital Receipt For: Primary General Other (specify)	President and Chief Executi Aggregate Year-to-Date ▼ 78	ve Officer 31.50
- C.	Full Name (Last, First, Middle Initial) Mr. Michael Maron Mailing Address 718 Teaneck Road		Date of Receipt M M D D Y Y Y Y Y Y Y Y
	City Teaneck	State Zip Code NJ 07666-4245	Transaction ID: 18726505 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Holy Name Medical Center	Occupation President and Chief Executi	ve Officer
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	00.00
	SUBTOTAL of Receipts This Page (optional)		1781.50
Γ	TOTAL This Period (last page this line number of	nlv)	

NAME OF COMMITTEE (in Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. William A McDonald Mailing Address 502 Rutledge Court City Edgewater State Zip Code Ledgewater St. Joseph's Regional Medical Center Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Kerny A McKean-Kelly Mailing Address 40 Imlaystown Road City State Zip Code President and Chief Executive Officer Receipt For: Pull Name (Last, First, Middle Initial) Ms. Kerny A McKean-Kelly Mailing Address 40 Imlaystown Road City State Zip Code Primary General Other (specify) ▼ Date of Receipt Transaction ID: 18726508 Amount of Each Receipt this I C Transaction ID: 18726508 Amount of Each Receipt this I C Transaction ID: 18726508 Amount of Each Receipt this I C Transaction ID: 18726508 Amount of Each Receipt this I C Transaction ID: 18726508 Amount of Each Receipt this I C Transaction ID: 18726508 Amount of Each Receipt this I C Full Name (Last, First, Middle Initial) Mr. Randall J. Minniear Mailing Address 3901 Worthington Court City State Zip Code Primary General Other (specify) ▼ Date of Receipt Transaction ID: 18726508 Amount of Each Receipt this I Date of Receipt Transaction ID: 18726508 Transaction ID: 18726508 Amount of Each Receipt this I Date of Receipt Transaction ID: 18726508 Transaction ID: 187265111 Amount of Each Receipt this I Transaction ID: 18726511 Amount of Each Receipt this I	12 16 17	13 14 15 16 [for the purpose of soliciting contributions	Use separate schedule(s) for each category of the Detailed Summary Page	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and Stater	I
Mr. William A McDonald Mailing Address 502 Rutledge Court City State Zip Code Edgewater NJ 07020-1662 FEC ID number of contributing federal political committee. Name of Employer State Signed Address Firm I Name (Last, First, Middle Initial) Ms. Karry A. McKean-Kelly Mailing Address 40 Imlaystown Road City State Zip Code President and Chief Executive Officer Receipt For: Primary General Other (specify) ▼ State Zip Code NJ 08520-6209 FEC ID number of contributing federal political committee. NJ 08520-6209 FEC ID number of contributing federal political committee. Name of Employer New Jersey HoSpital Association Receipt For: Primary General Other (specify) ▼ State Zip Code NJ 08520-6209 Amount of Each Receipt his I Cocupation Assistant Vice President Receipt For: Primary General Other (specify) ▼ State Zip Code NJ 08520-6209 Amount of Each Receipt his I Date of Receipt Transaction ID: 18726508 Amount of Each Receipt NJ 07728 Full Name (Last, First, Middle Initial) Mr. Randall J. Minniear Mailing Address 3901 Worthington Court City State Zip Code NJ 07728 Amount of Each Receipt his I Transaction ID: 18726511 Transaction ID: 18726511 Amount of Each Receipt his I	itee.	olicit contributions from such committee.	ddress of any political cómmittee to s	or for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full)	
City State Zip Code PEG ID number of contributing federal political committee. Name of Employer St. Joseph's Régional Medical Center Receipt For: Primary General Other (specify) ▼ State Zip Code East Windsor NJ 08520-6209 FEC ID number of contributing federal political committee. Name of Employer St. Joseph's Régional Medical Center Receipt For: Primary General Other (specify) ▼ State Zip Code East Windsor NJ 08520-6209 FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General Occupation Assistant Vice President Asgregate Year-to-Date ▼ Primary General Occupation Assistant Vice President Asgregate Year-to-Date ▼ Primary General Other (specify) ▼ 220.00 Date of Receipt Transaction ID: 18726508 Amount of Each Receipt this I Date of Receipt Transaction ID: 18726508 Amount of Each Receipt this I Date of Receipt Transaction ID: 18726511 Transaction ID: 18726511 Amount of Each Receipt this I Date of Receipt Transaction ID: 18726511 Amount of Each Receipt this I		M M / D D / Y Y Y Y		Mr. William A McDonald	∠ A .
Edgewater FEC ID number of contributing federal political committee. NJ 07020-1662 Amount of Each Receipt this I) 1 0		Zip Code		
Name of Employer St. Joseph's Regional Medical Center Receipt For: Primary	eriod	Amount of Each Receipt this Period	•		
Calc Center Prisident and Child Executive Onicer Receipt For:	1 1	500.00			
B. Full Name (Last, First, Middle Initial) Ms. Kerry A. McKean-Kelly Mailing Address 40 Imlaystown Road City State Zip Code East Windsor NJ 08520-6209 FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Randall J. Minniear Mailing Address 3901 Worthington Court City State Zip Code Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Randall J. Minniear Mailing Address 3901 Worthington Court City State Zip Code Firehold FEC ID number of contributing federal political committee. C Transaction ID: 18726511 Amount of Each Receipt this I Transaction ID: 18726511 Amount of Each Receipt this I			nt and Chief Executive Officer	ical Center	
Ms. Kerry A. McKean-Kelly Mailing Address 40 Imlaystown Road City State Zip Code East Windsor NJ 08520-6209 FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify) ▼ City Full Name (Last, First, Middle Initial) Mr. Randall J. Minniear Mailing Address 3901 Worthington Court City State Zip Code Transaction ID: 18726508 Amount of Each Receipt this I Date of Receipt Transaction ID: 18726508 Date of Receipt Transaction ID: 18726508 Transaction ID: 18726511 Amount of Each Receipt this I Date of Receipt Milling Address 3901 Worthington Court City State Zip Code Transaction ID: 18726511 Amount of Each Receipt this I Amount of Each Receipt this I			500.00	Primary General	
City State Zip Code Transaction ID: 18726508 East Windsor NJ 08520-6209 FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify) ▼ CIN Mr. Randall J. Minniear Mailing Address 3901 Worthington Court City State Zip Code Transaction ID: 18726511 Fec ID number of contributing federal political committee. CITY State Zip Code Transaction ID: 18726511 Amount of Each Receipt this I CITY State Zip Code Transaction ID: 18726511 Amount of Each Receipt this I CITY State Zip Code Transaction ID: 18726511 Amount of Each Receipt this I CITY State Zip Code Transaction ID: 18726511	V	i		Ms. Kerry A. McKean-Kelly	— В.
East Windsor FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify) ▼ C. Full Name (Last, First, Middle Initial) Mr. Randall J. Minniear Mailing Address 3901 Worthington Court City Freehold NJ O7728 Amount of Each Receipt this I Date of Receipt Transaction ID: 18726511 Amount of Each Receipt this I		11 12 2010	7'- O-d-		
FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Randall J. Minniear Mailing Address 3901 Worthington Court City State Zip Code Freehold NJ 07728 FEC ID number of contributing federal political committee. Transaction ID: 18726511 Amount of Each Receipt this I	riod		•	•	
New Jersey Hośpital Association Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Randall J. Minniear Mailing Address 3901 Worthington Court City State Zip Code Freehold FEC ID number of contributing federal political committee. Aggregate Year-to-Date ▼ Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		10.00	00320-0203	FEC ID number of contributing	
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Randall J. Minniear Mailing Address 3901 Worthington Court City State Zip Code Freehold NJ 07728 FEC ID number of contributing federal political committee. Table 120.00 Date of Receipt Transaction ID: 18726511 Amount of Each Receipt this I				New Jersey Hospital Assoc-	
Mr. Randall J. Minniear Mailing Address 3901 Worthington Court City State Zip Code Transaction ID: 18726511 Freehold NJ 07728 FEC ID number of contributing federal political committee.				Primary General	
City State Zip Code Transaction ID: 18726511 Freehold NJ 07728 FEC ID number of contributing federal political committee. C		Date of Receipt		Mr. Randall J. Minniear	_ C.
Freehold NJ 07728 Amount of Each Receipt this I FEC ID number of contributing federal political committee. C				Mailing Address 3901 Worthington Court	
FEC ID number of contributing federal political committee.			•	•	
federal political committee.	riod	Amount of Each Receipt this Period	07728		
	0.00	10.00		federal political committee.	
Name of Employer New Jersey Hospital Association Senior VP, Government Relations				New Jersey Hospital Assoc-	
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00				Primary General	
SUBTOTAL of Receipts This Page (optional)	0.00	520.00		SUBTOTAL of Receipts This Page (optional)	

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 117 / 261 (check only one) X
Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any perse aname and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Joann M. Morgano Mailing Address 7 Cottonwood Drive City Lumberton FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Assoc-	State Zip Code NJ 08048-5297 C Occupation Director, Marketing & Communicatio	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
iation Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	
Full Name (Last, First, Middle Initial) Ms. Patricia Ostaszewski, MS, CRRN, Mailing Address 54 Bay Way		Date of Receipt 1 1 1 2 2 0 1 0
City	State Zip Code	Transaction ID: 18726516
Brick FEC ID number of contributing federal political committee.	NJ 08723-7361	Amount of Each Receipt this Period 500.00
Name of Employer HEALTHSOUTH Rehabilitation Hospital of Receipt For: Primary General Other (specify) ▼	Occupation Chief Executive Officer Aggregate Year-to-Date 1000.00	
Full Name (Last, First, Middle Initial) Ms. Sally Roslow	1	Date of Receipt
Mailing Address 21 Sparrow Walk		M M / D D / Y Y Y Y Y Y 1 1 1 2 2 0 1 0
City	State Zip Code PA 18940	Transaction ID: 18726520
Newtown FEC ID number of contributing federal political committee.	PA 18940	Amount of Each Receipt this Period
Name of Employer New Jersey Hospital Association Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation VP Development & Trustee Relations Aggregate Year-to-Date 220.00	3
SUBTOTAL of Receipts This Page (optional) .		520.00

SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 118 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAC)	
Full Name (Last, First, Middle Initial) Mr. Roger D. Sarao, Jr.		Date of Receipt
Mailing Address 4 Poppy Lane City	State Zip Code	M M / D D / Y Y Y Y Y Y 11 12 2010
Howell	NJ 07731-1451	Transaction ID: 18726522 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer New Jersey Hospital Association	Occupation VP Health Economics	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 220.00	
Full Name (Last, First, Middle Initial) Mr. C Richard Sarle, , CPA, FAC Mailing Address P O Box 147		Date of Receipt
Mailing Address P O Box 147		11 12 2010
City	State Zip Code	Transaction ID: 18726523
Belle Mead	NJ 08502-0147	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	175.00
Name of Employer Carrier Clinic	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Michael J. Sniffen		Date of Receipt
Mailing Address 47 Murray Hill Squa	re	M M / D D / Y Y Y Y Y 1 1 1 1 2 2 0 1 0
City New Providence	State Zip Code NJ 07974-1531	Transaction ID: 18726524 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer St. Mary's Hospital	Occupation President & CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SURTOTAL of Receipts This Page (optional)	685.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 119 / 261 (check only one) X
	or for commercial purposes, other than using the	Statements may not be sold or used by any persolar name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Α.	Full Name (Last, First, Middle Initial) Ms. Cynthia A. Sorg Mailing Address 33 Second Street		Date of Receipt
		Stato Zin Codo	11 12 2010
	City Hopewell	State Zip Code NJ 08525-2014	Transaction ID: 18726525 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	10.00
	Name of Employer New Jersey Hospital Assoc- iation	Occupation Assistant to President	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	
- В.	Full Name (Last, First, Middle Initial) Dr. Joseph A Trunfio, , Ph.D. Mailing Address 100 Medican Avenue		Date of Receipt
	Mailing Address 100 Madison Avenue		11 1 12 2010
	City Morristown	State Zip Code NJ 07960-6136	Transaction ID: 18726527
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 500.00
	Name of Employer Atlantic Health	Occupation President and Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
С. С.	Full Name (Last, First, Middle Initial) Ms. Deborah K Zastocki		Date of Receipt
	Mailing Address 42 Long Ride Road		1 1 1 2 2 0 1 0
	City	State Zip Code	Transaction ID: 18726531
	Randolph FEC ID number of contributing federal political committee.	NJ 07869-4571	Amount of Each Receipt this Period 500.00
	Name of Employer Chilton Memorial Hospital	Occupation President and Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
	SUBTOTAL of Receipts This Page (optional)		1010.00
	TOTAL This Period (last page this line number	·	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 120 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. J. Frazer Rolen, Jr. Mailing Address 2204 Lakeshore Dri Suite 230 City	ve State Zip Code	Date of Receipt 1 1 1 5 2 0 1 0 Transaction ID: 18726533
Birmingham FEC ID number of contributing federal political committee.	AL 35209-6729	Amount of Each Receipt this Period
Name of Employer Alabama Hospital Association Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Sr. VP & Director, Federal Advocacy Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Mr. Gregg B. Everett Mailing Address 109 Ocala Drive		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18726534
Montgomery FEC ID number of contributing federal political committee.	AL 36117-6964	Amount of Each Receipt this Period 1000.00
Name of Employer Alabama Hospital Associat- ion Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Sr. Vice President & General Counsel Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Ms. Rosemary Blackmon		Date of Receipt
Mailing Address 547 Le Grand Place		11 15 7 2010
City	State Zip Code	Transaction ID: 18726535
Montgomery FEC ID number of contributing federal political committee.	AL 36106-1825	Amount of Each Receipt this Period 1000.00
Name of Employer Alabama Hospital Associat- ion	Occupation Vice President of Public Relations	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
	l)	3000.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 121 / 261 (check only one) X
Any or fo	information copied from such Reports and Sor commercial purposes, other than using the	Statements may e name and add	/ not be sold or used by any persolress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
	Full Name (Last, First, Middle Initial) Ms. Carey M. Owen			Date of Receipt
_	Mailing Address 2520 Springwood Drive	e		111 15 2010
	Dity Auburn	State AL	Zip Code 36830-7236	Transaction ID: 18726536 Amount of Each Receipt this Period
F	FEC ID number of contributing ederal political committee.	C	30030-7230	1000.00
	Name of Employer East Alabama Medical Cent- er	Occupation Vice Pres		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
3. <u>I</u>	Full Name (Last, First, Middle Initial) Ms. Roben Nutter Mailing Address 2000 Pepperell Parkw	1		Date of Receipt
-	Mailing Address 2000 Peppereil Parkw	<i>r</i> ay 		11 1 15 2010
	Dity Opelika	State AL	Zip Code 36801-5422	Transaction ID: 18726537
F	FEC ID number of contributing ederal political committee.	C	30001-3422	Amount of Each Receipt this Period
ŀ	Name of Employer East Alabama Medical Cent- er	Occupation Manager	n Healthsource	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
	Full Name (Last, First, Middle Initial) Mr. Sam Price			Date of Receipt
N	Mailing Address 2000 Pepperell Parkwa	ay		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Dity	State	Zip Code	Transaction ID: 18726538
F	Opelika FEC ID number of contributing ederal political committee.	C	36802-3201	Amount of Each Receipt this Period 1000.00
	Name of Employer East Alabama Medical Cent- er	Occupation Vice Pres	n sident, Finance	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
su	BTOTAL of Receipts This Page (optional)			3000.00
	TAL This Period (last page this line number			

SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 122 / 261 (check only one) X 11a 11b 11c 12
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may n	ot be sold or used by any persons of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)	the name and addre	ss or any political committee to) Solicit Contributions from Such Committee.
American Hospital Association PAC	;		
Full Name (Last, First, Middle Initial)			Date of Descript
Ms. Sarah T. Gray Mailing Address 3010 Pheasant Dr			Date of Receipt 1 1 1 5 2 0 1 0
City	State	Zip Code	Transaction ID: 18726539
<u>Opelika</u>	AL	36801-3363	Amount of Each Receipt this Period
FEC ID number of contributing	C	00001 0000	1000.00
federal political committee.			
Name of Employer East Alabama Medical Cent-	Occupation Assistant V	ice President/Information	
<u>er</u> Receipt For:		ear-to-Date $lacktrians$	\dashv
Primary General	7.ggrogato 1		7
Other (specify) ▼		1000.00	
Full Name (Last, First, Middle Initial) Ms. Jane Robertson			Date of Receipt
Mailing Address 2161 Wedgewood C	Court		1 1 1 5 2 0 1 0
City	State	Zip Code	Transaction ID: 18726540
Auburn	AL	36830-2582	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer East Alabama Medical Cent-	Occupation Asst. V.P.		
<u>er</u> Receipt For:		ear-to-Date V	_
Primary General Other (specify) ▼	riggregate	1000.00	
Full Name (Last, First, Middle Initial) Mr. Christopher Clark			Date of Receipt
Mailing Address 13045 Sawyer Drive)		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 18726541
<u>Opelika</u>	AL	36801	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer East Alabama Medical Cent-	Occupation Assistant V	ice President	
<u>er</u> Receipt For:		ear-to-Date V	-
Primary General Other (specify) ▼	, iggiogato i	1000.00	1
		0 0 0 0 0 0	-

SCHEDULE A (FEC Form SITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 123 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association P	and Statements may not be sold or used by any person ng the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Gregory Nichols Mailing Address 22136 Veterans I	Memorial Pkwy	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Lafayette	State Zip Code AL 36862-3022	Transaction ID: 18726542
FEC ID number of contributing federal political committee.	C 30002-3022	Amount of Each Receipt this Period 1000.00
Name of Employer East Alabama Medical Center Receipt For: Primary General Other (specify) ▼	Occupation Assistant Vice President, Operations Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Ms. Carol Murphey Mailing Address 2710 Rocky Broo	k Rd.	Date of Receipt 1 1 1 5 2 0 1 0
City	State Zip Code	Transaction ID: 18726543
Opelika FEC ID number of contributing federal political committee.	AL 36801-2132	Amount of Each Receipt this Period
Name of Employer East Alabama Medical Cent- er	Occupation Asst. VP/ Outside Operations	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Ms. Danne J. Howard		Date of Receipt
Mailing Address 1812 Woodmere	Loop	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18726544
Montgomery FEC ID number of contributing federal political committee.	AL 36117-5004	Amount of Each Receipt this Period 500.00
Name of Employer Alabama Hospital Associat- ion	Occupation VP, State Government Relations	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
	onal)	2500.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 124 / 261 (check only one) X
	nformation copied from such Reports and S commercial purposes, other than using the ME OF COMMITTEE (In Full)	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\	merican Hospital Association PAC			
Ms	II Name (Last, First, Middle Initial) s. Jane Knight			Date of Receipt
Ма	ailing Address 1612 Salisbury Place			11 1 15 2010
Cit	у	State	Zip Code	Transaction ID: 18726545
<u>M</u>	ontgomery	AL	36117-2562	Amount of Each Receipt this Period
	C ID number of contributing deral political committee.	C		500.00
	nme of Employer abama Hospital Associat-	Occupatio	n sident, Member Relations	
<u>ion</u> Re	n eceipt For:	, '	e Year-to-Date	\dashv
	Primary General Other (specify) ▼	, iggrogate	500.00	
	Il Name (Last, First, Middle Initial)	I.		Date of Receipt
	ailing Address P O Box 6907			M M / D D / Y Y Y Y Y Y Y 1 1 1 1 5 2 0 1 0
Cit	y .	State	Zip Code	Transaction ID: 18726546
<u>Dc</u>	othan	AL	36302-6907	Amount of Each Receipt this Period
	C ID number of contributing deral political committee.	C		500.00
Na Flo	me of Employer owers Hospital	Occupation Chief Fire	n nancial Officer	
Re	eceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	II Name (Last, First, Middle Initial) . J. David McCormack	l		Date of Receipt
Ма	ailing Address 600 South Third Street	t		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Cit	y .	State	Zip Code	Transaction ID: 18726547
<u>Ga</u>	adsden	AL	35901-5399	Amount of Each Receipt this Period
	C ID number of contributing deral political committee.	C		500.00
Na Riv Ce	ume of Employer verview Regional Medical enter	Occupation Executiv	n e Director	
	eceipt For:	Aggregate	e Year-to-Date ▼	
-	Primary General Other (specify) ▼		500.00	

SCHEDULE A (FEC Form 3X)	Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 125 / 261 (check only one)
ITEMIZED RECEIPTS	Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and St or for commercial purposes, other than using the	ratements may not be sold or used by any persor name and address of any political committee to s	for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)		
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. James G Chastain, , FACHE		Date of Receipt
Mailing Address P O Box 157-A		1 1 0 9 2 0 1 0
City	State Zip Code	Transaction ID: 18726555
Whitfield	MS 39193-0157	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	87.50
Name of Employer Mississippi State Hospital	Occupation Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 352.50	
Full Name (Last, First, Middle Initial) Mr. Stephen K. Jones		Date of Receipt
Mailing Address 98 Providence Boulava	rd	1 1 1 2 2 0 1 0
City	State Zip Code	Transaction ID: 18726600
Kendall Park	NJ 08824	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1250.00
Name of Employer Robert Wood Johnson Unive- rsity Hospita	Occupation President & CEO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	2500.00	
Full Name (Last, First, Middle Initial) Ms. Elizabeth A. Bosley		Date of Receipt
Mailing Address 781 Norway Avenue		M M / D D / Y Y Y Y Y Y 1 1 1 1 2 2 0 1 0
City Huntington	State Zip Code WV 25705-3830	Transaction ID: 18726776 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 25765 5656	250.00
Name of Employer St. Mary's Medical Center	Occupation VP Patient Care Services	1
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	·····	1587.50

A.

В.

C.

SCHEDULE A (FEC Form 3X)		Harana and Land Co.	FOR LINE NUMBER: PAGE 126 / 261		
· ·		Use separate schedule(s) for each category of the	(check only one)		
ITEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12		
		Dotailed Caillina, F. age	13 14 15 16 17		
Any information copied from such Reports and State or for commercial purposes, other than using the r	atements may name and ado	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.		
NAME OF COMMITTEE (In Full)					
American Hospital Association PAC					
Full Name (Last, First, Middle Initial) Dr. Glenn Crotty, Jr., M.D.			Date of Receipt		
Mailing Address 36E Coventry Road			1 1 1 1 2 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	State	Zip Code	Transaction ID: 18726777		
South Charleston	WV	25309	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		250.00		
Name of Employer Charleston Area Medical Center	Occupation Executive	vP & COO			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00			
Full Name (Last, First, Middle Initial) Ms. Vickie Gay			Date of Receipt		
Mailing Address 536 Waterplant Road			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	State	Zip Code	Transaction ID: 18726778		
<u>Fayetteville</u>	WV	25840-5215	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		250.00		
Name of Employer Montgomery General Hospit- al	Occupation Chief Exe	n ecutive Officer			
Receipt For:	Aggregate	Year-to-Date ▼			
Primary General Other (specify) ▼		250.00			
Full Name (Last, First, Middle Initial) Mr Larry C Hudson			Date of Receipt		
Mailing Address 5035 Bennington Drive			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	State	Zip Code	Transaction ID: 18726781		
Cross Lanes	WV	25313-2055	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		250.00		
Name of Employer Charleston Area Medical Center	Occupation Executive	vP & CFO			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00			
SUBTOTAL of Receipts This Page (optional)			750.00		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 127 / 261 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any perse name and address of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Evelyn Letnaunchyn Mailing Address 225 Ariel Heights City Charleston FEC ID number of contributing federal political committee.	State Zip Code WV 25311-1143	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer n/a Receipt For: Primary General Other (specify) ▼	Occupation Homemaker Aggregate Year-to-Date 500.00	
Full Name (Last, First, Middle Initial) Mr. John A. May Mailing Address 7 Sun Bonnet Lane		Date of Receipt M
City	State Zip Code	Transaction ID: 18726784
Morgantown	WV 26508-2536	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Wetzel County Hospital	Occupation Chief Financial Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. John E. Walker		Date of Receipt
Mailing Address 151 Brookside Meado	ws	1 1 1 2 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18726792
Chapmanville	WV 25508-9432	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer Logan Regional Medical Ce- nter	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
		1150.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 128 / 261 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to s	13 14 15 16 17 for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr Robert D Whitler		Date of Receipt
Mailing Address 5 Evergreen Drive		M M / D D / Y Y Y Y Y 1 1 1 1 2 2 0 1 0
City	State Zip Code	Transaction ID: 18726794
Elkview	WV 25071-9314	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Charleston Area Medical	Occupation	1
Center	Vice President Government and Comn	nunit
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) B. Ms. Nancy D. Adams, RN		Date of Receipt
Mailing Address Parkside Estate 327 Fisher Drive		M M / D D / Y Y Y Y Y 1 1 1 2 2 0 1 0
City	State Zip Code	Transaction ID: 18726806
Cumberland	MD 21502-6372	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	17.00
Name of Employer Memorial Hospital and Med- ical Center o	Occupation Senior VP/Chief Nurse Executive	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 204.00	
Full Name (Last, First, Middle Initial) Mr. Thomas C Dowdell, , FACHE	1	Date of Receipt
Mailing Address 1026 Cherrywood Ave	enue	1 1 1 2 2 0 1 0
City	State Zip Code	Transaction ID: 18726808
Cumberland	MD 21502-1939	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	34.00
Name of Employer Memorial Hospital and Med- ical Center o	Occupation Senior Vice President and Chief Opera	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 221.00	
SUBTOTAL of Receipts This Page (optional) .		301.00

Maryland Hospital Associa- tion	State Zip Code MD 21742-3339 C Deccupation President, MHEI Aggregate Year-to-Date 255.00	Date of Receipt Date of Receipt Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Mark S Rulle Mailing Address 1148 Hamilton Blvd. City Hagerstown FEC ID number of contributing federal political committee. Name of Employer Maryland Hospital Association Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial)	MD 21742-3339 C	Transaction ID: 18726814 Amount of Each Receipt this Period
Mailing Address 1148 Hamilton Blvd. City Hagerstown FEC ID number of contributing federal political committee. Name of Employer Maryland Hospital Association Receipt For: Primary General Other (specify) ▼	MD 21742-3339 C	Transaction ID: 18726814 Amount of Each Receipt this Period
Hagerstown FEC ID number of contributing federal political committee. Name of Employer Maryland Hospital Association Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial)	MD 21742-3339 C	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Maryland Hospital Association Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial)	C Description President, MHEI Aggregate Year-to-Date ▼	
tion Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial)	President, MHEI Aggregate Year-to-Date ▼	
Primary General Other (specify) Full Name (Last, First, Middle Initial)		
Mailing Address 2489 Heritage Park Road		Date of Receipt
	Charles 7:- Coada	11 12 2010
City Piggott	State Zip Code AR 72454-1321	Transaction ID: 18726839 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Pemiscot Mémórial Health System	Occupation Chief Financial Officer	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Kerry L Noble		Date of Receipt
Mailing Address P O Box 489		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18726844
<u>Hayti</u>	MO 63851-0489	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Pemiscot Mémórial Health System	Occupation Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		755.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 130 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any persor are name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Robert A. Malson Mailing Address 1850 Redwood Terra City Washington FEC ID number of contributing federal political committee.	ce, NW State Zip Code DC 20012-1023 C	Date of Receipt M M J J J J Z J J J J J J J J J J J J J
Name of Employer District of Columbia Hosp- ital Associat Receipt For: Primary Other (specify) ▼	President & Chief Executive Officer Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. John T Fox Mailing Address 1440 Clifton Road NE	E, Ste 420	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18727323
<u>Atlanta</u>	GA 30322-1053	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Emory Healthcare	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Lynda D Curtis		Date of Receipt
Mailing Address 462 First Avenue		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City New York	State Zip Code NY 10016-9196	Transaction ID: 18727347 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Bellevue Hospital Center	Occupation Senior Vice President and Executive D	Di
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SURTOTAL of Receipts This Page (optional)	·····	1200.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 131 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 17
7	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ A.	Full Name (Last, First, Middle Initial) Mr. Roger E Green Mailing Address 559 Capitol Boulevard,	6-South		Date of Receipt
	City Saint Paul	State MN	Zip Code 55103-0000	Transaction ID: 18727413 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.83
	Name of Employer HealthEast Care System Receipt For: Primary General Other (specify) ▼		n sident Strategy, Policy and C e Year-to-Date ▼ 249.98	Co]
- З.	Full Name (Last, First, Middle Initial) Mr. Lawrence J Massa Mailing Address 2550 University Avenue	e W.		Date of Receipt 1 1 1 5 2 0 1 0
	City	State	Zip Code	Transaction ID: 18727472
	Saint Paul FEC ID number of contributing federal political committee.	C	55114-1052	Amount of Each Receipt this Period 450.00
	Name of Employer Minnesota Hospital Associ- ation	Occupation Presiden	t	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1125.00	
- >.	Full Name (Last, First, Middle Initial) Mr. Thomas O'Connor			Date of Receipt
	Mailing Address 4050 Coon Rapids Bou	ılevard		1 1 1 5 2 0 1 0
	City Coon Rapids	State MN	Zip Code 55433-2522	Transaction ID: 18727473 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.46
	Name of Employer Mercy Hospital	Occupation Presiden		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 224.55	
	SUBTOTAL of Receipts This Page (optional)			496.29
	TOTAL This Period (last page this line number of	only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 132 / 261 (check only one) X
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Gary Bebow, , FACHE Mailing Address P O Box 2197 City Batesville FEC ID number of contributing federal political committee. Name of Employer White River Medical Center Receipt For: Primary General Other (specify)	State Zip Code AR 72503-2197 C Occupation Administrator and Chief Executive Of Aggregate Year-to-Date 228.00	Date of Receipt M M
Full Name (Last, First, Middle Initial) Mr. Roger M. Busfield Mailing Address 419 Natural Resource City	State Zip Code	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Little Rock FEC ID number of contributing federal political committee. Name of Employer Arkansas Hospital Association Receipt For: Primary General Other (specify) ▼	AR 72205-1576 C Occupation President Emeritus Aggregate Year-to-Date ▼ 325.00	Amount of Each Receipt this Period 325.00
Full Name (Last, First, Middle Initial) Mr. Darren Caldwell Mailing Address P O Box 32 City De Witt	State Zip Code AR 72042-0032	Date of Receipt M M
FEC ID number of contributing federal political committee. Name of Employer DeWitt Hospital Receipt For:	Occupation Chief Executive Officer Aggregate Year-to-Date	228.00
Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional) .	228.00	781.00

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions for for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. David Coero Malling Address P O Box 797 City State Zip Code Camdon AR 71701-0797 FEC ID number of contributing federal political committee. City Primary General Orbit (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Krissy Estrem, FACHE Malling Address 214 Carter Street City State Zip Code Berrovillo AR 72616-4303 FEC ID number of contributing federal political committee. City State Zip Code Berrovillo AR 72616-4303 FEC ID number of contributing federal political committee. City State Zip Code Berrovillo AR 72616-4303 FEC ID number of contributing federal political committee. Primary General Orbit (specify) ▼ Fell Name (Last, First, Middle Initial) Mr. Robert Clant Mailing Address 25 White Oak Drive City State Zip Code AR 72034-3443 FEC ID number of contributing federal political committee. City State Zip Code AR 72034-3443 FEC ID number of contributing federal political committee. City State Zip Code AR 72034-3443 FEC ID number of contributing federal political committee. City State Zip Code AR 72034-3443 FEC ID number of contributing federal political committee. City AR 72034-3444 Amount of Each Receipt this Period Transaction ID: 18731144 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. City AR 72034-3443 FEC ID number of contributing federal political committee. City AR 72034-3444 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. City AR 72034-3444 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. City AR 72034-3444 Amount of Each Receipt this Period FEC	SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 133 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 17
American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. David Cloure Maing Address P O Box 797 City State Zip Code AR 71701-0797 FEC ID number of contributing federal political committee. Name of Employer Outshits Medicial Genter President Receipt For: Primary General Other (specify) ▼ State Zip Code AR 71701-0797 FULL Name (Last, First, Middle Initial) Aggregate Year-to-Date ▼ Date of Receipt this Period Date of Receipt 1 1 1 1 6 2 20 1.0 Transaction ID: 18731142 Amount of Each Receipt this Period Date of Receipt 1 1 1 1 6 2 20 1.0 Transaction ID: 18731142 Amount of Each Receipt this Period Date of Receipt 1 1 1 6 2 20 1.0 Transaction ID: 18731142 Amount of Each Receipt this Period Date of Receipt 1 1 1 6 2 20 1.0 Transaction ID: 18731144 Amount of Each Receipt this Period Date of Receipt 1 1 1 6 2 20 1.0 Transaction ID: 18731144 Amount of Each Receipt this Period Date of Receipt 1 1 1 6 2 20 1.0 Transaction ID: 18731144 Amount of Each Receipt this Period Date of Receipt 1 1 1 6 2 20 1.0 Transaction ID: 18731144 Amount of Each Receipt this Period Date of Receipt 1 1 1 6 2 20 1.0 Transaction ID: 18731144 Amount of Each Receipt this Period Date of Receipt 1 1 1 6 2 20 1.0 Transaction ID: 18731144 Amount of Each Receipt this Period Date of Receipt 1 1 1 6 2 20 1.0 Transaction ID: 18731144 Amount of Each Receipt this Period Date of Receipt 1 1 1 6 2 20 1.0 Transaction ID: 18731144 Amount of Each Receipt this Period Date of Receipt 1 1 1 6 2 20 1.0 Transaction ID: 18731144 Amount of Each Receipt this Period Date of Receipt 1 1 1 6 2 20 1.0 Transaction ID: 18731144 Amount of Each Receipt this Period Date of Receipt 1 1 1 6 2 20 1.0 Transaction ID: 18731144 Amount of Each Receipt this Period Date of Receipt 1 1 1 6 2 20 1.0 Transaction ID: 18731144 Amount of Each Receipt this Period Date of Receipt 1 1 1 1 6 2 20 1.0 Transaction ID: 18731144 Amount of Each Receipt this Period Date of Receipt 1 1 1 1 6 2 20 1.0 Transaction	Any information copied from such Rep or for commercial purposes, other than	orts and Statements may not be sold or used by any person using the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Mailing Address P O Box 797 City State Zip Code AR 71701-0797 FEC ID number of contributing federal political committee. C Occupation President Receipt For: Primary General Other (specify) ▼ State Zip Code AR 72516-4303 Full Name (Last, First, Middle Initial) AR 72616-4303 FEC ID number of contributing federal political committee. C Date of Receipt Transaction ID: 18731138 Amount of Each Receipt this Period Date of Receipt Transaction ID: 18731138 Amount of Each Receipt this Period Date of Receipt Transaction ID: 18731138 Date of Receipt Transaction ID: 18731138 Amount of Each Receipt this Period Transaction ID: 18731142 Amount of Each Receipt this Period Transaction ID: 18731142 Amount of Each Receipt this Period Transaction ID: 18731144 Amount of Each Receipt this Period Transaction ID: 18731144 Amount of Each Receipt this Period Transaction ID: 18731144 Amount of Each Receipt this Period Transaction ID: 18731144 Amount of Each Receipt this Period Transaction ID: 18731144 Amount of Each Receipt this Period Transaction ID: 18731144 Amount of Each Receipt this Period Transaction ID: 18731144 Amount of Each Receipt this Period Transaction ID: 18731144 Amount of Each Receipt this Period Transaction ID: 18731144 Amount of Each Receipt this Period Transaction ID: 18731144 Amount of Each Receipt this Period Transaction ID: 18731144 Amount of Each Receipt this Period Transaction ID: 18731144 Amount of Each Receipt this Period Transaction ID: 18731144 Amount of Each Receipt this Period		n PAC	
City Camden AR 71701-0797 FEC ID number of contributing federal political committee. Name of Employer Ouschifal Medicial Center Receipt For: Primary General Other (specify) ▼ 325.00 Full Name (Last, First, Middle Initial) AR 72816-4393 FEC ID number of contributing federal political committee. City State Zip Code AR 72816-4393 FEC ID number of contributing federal political committee. City State Zip Code AR 72816-4393 FEC ID number of contributing federal political committee. Primary General Other (specify) ▼ 228.00 Date of Receipt Transaction ID: 18731142 Amount of Each Receipt this Period Transaction ID: 18731144 Amount of Each Receipt this Period Transaction ID: 18731144 Amount of Each Receipt this Period Transaction ID: 18731144 Amount of Each Receipt this Period Transaction ID: 18731144 Amount of Each Receipt this Period Transaction ID: 18731144 Amount of Each Receipt this Period Transaction ID: 18731144 Amount of Each Receipt this Period Transaction ID: 18731144 Amount of Each Receipt this Period Transaction ID: 18731144 Amount of Each Receipt this Period Transaction ID: 18731144 Amount of Each Receipt this Period Transaction ID: 18731144 Amount of Each Receipt this Period Transaction ID: 18731144 Amount of Each Receipt this Period Transaction ID: 18731144 Amount of Each Receipt this Period Transaction ID: 18731144 Amount of Each Receipt this Period Transaction ID: 18731144 Amount of Each Receipt this Period Transaction ID: 18731144 Amount of Each Receipt this Period Transaction ID: 18731144 Amount of Each Receipt this Period Transaction ID: 18731144 Transaction ID: 18731145	•		Date of Receipt
Camden AR 71701-0797			11 16 2010
FEC ID number of contributing federal political committee. Name of Employer Other (specify) ▼		·	
Second	Camden	AR /1/01-0/9/	Amount of Each Receipt this Period
President Aggregate Year-to-Date ▼		C	325.00
Primary General Other (specify) ▼ 325.00 Full Name (Last, First, Middle Initial) Ms. Kristy Estrem, FACHE Mailing Address 214 Carter Street City State Zip Code Berryville AR 72616-4303 FEC ID number of contributing federal political committee. Name of Employer St. J. Ohn's Hospital-Berry- wille Receipt For: Primary General Other (specify) ▼ 228.00 City State Zip Code AR 72616-4303 Date of Receipt is Period Transaction ID: 18731142 Amount of Each Receipt this Period 228.00 Date of Receipt Transaction ID: 18731144 Amount of Each Receipt in President Mailing Address 25 White Oak Drive City State Zip Code Conway AR 72034-3443 FEC ID number of contributing federal political committee. Name of Employer Conway Regional Medical Conter Board Member Receipt For: Primary General Other (specify) ▼ 325.00	Name of Employer Ouachita Medical Center	•	
Mailing Address 214 Carter Street Mailing Address 214 Carter Street	Primary General		
City Berryville AR 72616-4303 FEC ID number of contributing federal political committee. Name of Employer St. John's Hospital-Berry-ville Receipt For: Primary Other (specify) ▼ Coccupation President Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Mailing Address 25 White Oak Drive City City State Conway FEC ID number of contributing federal political committee. Name of Employer Conway AR 72034-3443 FEC ID number of contributing federal political committee. Name of Employer Conway Regional Medical Center Receipt For: Primary Aggregate Year-to-Date ▼ 11 1 6 2010 Transaction ID: 18731142 Amount of Each Receipt this Period Transaction ID: 18731142 Amount of Each Receipt Transaction ID: 18731144 Amount of Each Receipt this Period Coccupation Board Member Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼))	Date of Receipt
Berryville AR 72616-4303 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer Conway Regional Medical Center Receipt For: Page of Employer Conway Regional Medical Center Receipt For: Primary	Mailing Address 214 Carter Str	reet	
FEC ID number of contributing federal political committee. Name of Employer St. John's Hospital-Berry-ville Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Robert Gant Mailing Address 25 White Oak Drive City State Zip Code AR 72034-3443 FEC ID number of contributing federal political committee. Name of Employer Conway Regional Medical Center Receipt For: Primary General Occupation Board Member Aggregate Year-to-Date ▼ 325.00	City	•	Transaction ID: 18731142
Name of Employer St. John's Hospital-Berry-yille President	Berryville	AR 72616-4303	Amount of Each Receipt this Period
St. John's Hospital-Berry- wille Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Robert Gant Mailing Address 25 White Oak Drive City Conway AR FEC ID number of contributing federal political committee. Name of Employer Conway Regional Medical Center Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Date of Receipt M M M / D D / Y Y Y Y Y Y 1 1 1 1 6 / 2 0 1 0 Transaction ID: 18731144 Amount of Each Receipt this Period Occupation Board Member Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Other (specify) ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼		C	228.00
Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Robert Gant Mailing Address 25 White Oak Drive City Conway FEC ID number of contributing federal political committee. Name of Employer Conway Regional Medical Center Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Date of Receipt M M M 1 1 1 1 1 6 2 0 1 0 Transaction ID: 18731144 Amount of Each Receipt this Period 325.00	St. John's Hospital-Berry-	•	
Mr. Robert Gant Mailing Address 25 White Oak Drive City State Zip Code Conway AR 72034-3443 FEC ID number of contributing federal political committee. Name of Employer Conway Regional Medical Center Receipt For: Primary General Other (specify) ▼ Date of Receipt M M M / D D / 2 0 1 0 Transaction ID: 18731144 Amount of Each Receipt this Period 325.00	Primary General		
City Conway State Zip Code AR 72034-3443 FEC ID number of contributing federal political committee. Name of Employer Conway Regional Medical Center Receipt For: Primary General Other (specify) ▼ State Zip Code Transaction ID: 18731144 Amount of Each Receipt this Period 325.00 Aggregate Year-to-Date ▼ 325.00))	Date of Receipt
Conway FEC ID number of contributing federal political committee. Name of Employer Conway Regional Medical Center Receipt For: Primary General Other (specify) ▼ AR 72034-3443 Amount of Each Receipt this Period 325.00 Aggregate Year-to-Date ▼ 325.00	Mailing Address 25 White Oak	Drive	
FEC ID number of contributing federal political committee. Name of Employer Conway Regional Medical Center Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00	City	·	Transaction ID: 18731144
Name of Employer Conway Regional Medical Center Receipt For: Primary General Other (specify) ▼ Occupation Board Member Aggregate Year-to-Date ▼ 325.00	Conway	AR 72034-3443	Amount of Each Receipt this Period
Conway Regional Medical Center Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00		C	325.00
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00	Conway Regional Medical	·	
Other (specify) ▼ 325.00	Receipt For:	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)	_	325.00]
SOBTOTAL OF NEVERBLE THIS Page (Optional)	SURTOTAL of Possints This Poss (portional	878.00
TOTAL This Period (last page this line number only)		·	

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 134 / 261 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may	 y not be sold or used by any perso dress of any political committee to	13 14 15 16 10 16 17 17 18 18 19 19 19 19 19 19 19 19 19 19 19 19 19
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. Russell D Harrington, , Jr.			Date of Receipt
Mailing Address 9601 Interstate 630, I	Exit 7		M M / D D / Y Y Y Y Y Y 1 1 1 1 1 6 2 0 1 0
City	State	Zip Code	Transaction ID: 18731145
Little Rock	AR	72205-7202	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		244.00
Name of Employer Baptist Health	Occupatio Presiden	n t and Chief Executive Office	 r
Receipt For:	 	e Year-to-Date ▼	
Primary General Other (specify) ▼	35.154.6	244.00	
Full Name (Last, First, Middle Initial) Mr. Tim J Johnsen			Date of Receipt
Mailing Address 300 Werner Street			1 1 1 6 2 0 1 0
City	State	Zip Code	Transaction ID: 18731147
Hot Springs Nation	AR	71913-6406	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		325.00
Name of Employer St. Joseph's Mercy Health Center	Occupatio Chief Ex	n ecutive Officer	7
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 325.00	
Full Name (Last, First, Middle Initial) Mr. Walter E Johnson, , Jr.			Date of Receipt
Mailing Address 1600 West 40th Aver	nue		M M / D D / Y Y Y Y Y 1 1 1 1 6 2 0 1 0
City	State	Zip Code	Transaction ID: 18731148
Pine Bluff	AR	71603-7089	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		228.00
Name of Employer Jefferson Regional Medical Center	Occupatio Presiden	n t and Chief Executive Office	r
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	228.00	
			797.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 135 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American Hospital Association PA	and Statements may not be sold or used by any persong the name and address of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Jeffrey A Johnston Mailing Address P O Box 17000 City Fort Smith	State Zip Code AR 72917-7000	Date of Receipt M M M
FEC ID number of contributing federal political committee.	C	325.00
Name of Employer St. Edward Mercy Medical Center Receipt For: Primary General Other (specify) ▼	Occupation President & Chief Executive Officer Aggregate Year-to-Date 325.00	
Full Name (Last, First, Middle Initial) Mr. Edward L Lacy, , FACHE Mailing Address 1800 Bypass Road	3	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18731151
Heber Springs	AR 72543-9135	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	228.00
Name of Employer Baptist Health Medical Ce- nter-Heber Sp Receipt For:	Occupation Vice President and Administrator Aggregate Year-to-Date	
Primary General Other (specify) ▼	228.00	
Full Name (Last, First, Middle Initial) Mr. Robin E Lake Mailing Address 620 North Main St	root	Date of Receipt
		11 16 2010
City Harrison	State Zip Code AR 72601-2911	Transaction ID: 18731163
FEC ID number of contributing federal political committee.	C 72001-2911	Amount of Each Receipt this Period 650.00
Name of Employer North Arkansas Regional Medical Center Receipt For:	Occupation Chief Executive Officer	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
SUPTOTAL of Possints This Page (entire	al)	1203.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 136 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 17		
or for commercial purposes, other than using	d Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) American Hospital Association PAC				
Full Name (Last, First, Middle Initial) Mr. James M Lambert Mailing Address 2000 Callery August		Date of Receipt		
Mailing Address 2302 College Avenu		11 1 16 2010		
City Conway	State Zip Code AR 72032-6297	Transaction ID: 18731164 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	228.00		
Name of Employer Conway Regional Medical Center	Occupation Chief Executive Officer			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 228.00			
Full Name (Last, First, Middle Initial) Ms Debbie Love		Date of Receipt		
Mailing Address 419 Natural Resource	Mailing Address 419 Natural Resources Drive			
City	State Zip Code	Transaction ID: 18731165		
Little Rock FEC ID number of contributing federal political committee.	AR 72205-1576	Amount of Each Receipt this Period 260.00		
Name of Employer Arkansas Hospital Associa- tion	Occupation Director of Financial Services			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00			
Full Name (Last, First, Middle Initial) Mr Mark Lowman		Date of Receipt		
Mailing Address 9601 Interstate 630,	Exit 7	M M / D D / Y Y Y Y Y Y 1 1 1 1 6 2 0 1 0		
City	State Zip Code	Transaction ID: 18731166		
Little Rock FEC ID number of contributing federal political committee.	AR 72205-7299	Amount of Each Receipt this Period 228.00		
Name of Employer Baptist Health	Occupation Vice President Strategic Developmen	t		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 228.00			
SUBTOTAL of Receipts This Page (optional)	716.00		
TOTAL This Period (last page this line numb	per only)			

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 137 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 17
4	Any information copied from such Reports and Stor for commercial purposes, other than using the	atements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Α.	Full Name (Last, First, Middle Initial) Mr. Harold E Mitchell, , Jr.		Date of Receipt
	Mailing Address 404 South Bradley Stre		11 16 2010
	City Warren	State Zip Code AR 71671-3493	Transaction ID: 18731167 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	228.00
	Name of Employer Bradley County Medical Ce- nter	Occupation Administrator and Chief Executive Off	- fi
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 228.00	
— В.	Full Name (Last, First, Middle Initial) Mr. Larry Morse		Date of Receipt
	Mailing Address P O Box 738		11 16 2010
	City Clarksville	State Zip Code AR 72830-0738	Transaction ID: 18731676
	FEC ID number of contributing federal political committee.	AR 72830-0738	Amount of Each Receipt this Period 228.00
	Name of Employer Johnson Regional Medical Center	Occupation Chief Executive Officer and Administr	a
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 228.00	
_ C.	Full Name (Last, First, Middle Initial) Mr. Scott Peek		Date of Receipt
	Mailing Address P O Box 639		1 1 1 6 2 0 1 0
	City	State Zip Code	Transaction ID: 18731680
	Danville FEC ID number of contributing federal political committee.	AR 72833-0639	Amount of Each Receipt this Period 325.00
	Name of Employer Chambers Memorial Hospital	Occupation President and Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
	SUBTOTAL of Receipts This Page (optional)		781.00
	TOTAL This Period (last page this line number	only)	

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 138 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 11
A	ny information copied from such Reports and St r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sold or used by any pers name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Ms. Nancy Robertson Mailing Address 7 Crape Myrtle Place		Date of Receipt 1 1 1 1 6 2 0 1 0
	City	State Zip Code	Transaction ID: 18731685
	Little Rock FEC ID number of contributing federal political committee.	AR 72210-5654	Amount of Each Receipt this Period 325.00
	Name of Employer Arkansas Hospital Association Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Publications Editor Aggregate Year-to-Date 325.00	
 3.	Full Name (Last, First, Middle Initial) Ms Rosi Smith Mailing Address 800 Marshall Street		Date of Receipt 1 1 1 1 6 2 0 1 0
	City	State Zip Code	Transaction ID: 18731688
	Little Rock	AR 72202-3591	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	228.00
	Name of Employer Arkansas Children's Hospi- tal	Occupation Director, Government Relations	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 228.00	
	Full Name (Last, First, Middle Initial) Mr. Ronald K Rooney, , FACHE Mailing Address P O Box 339		Date of Receipt
	City	State Zip Code	1 1 1 6 2 0 1 0 Transaction ID: 18731696
	<u>Paragould</u>	AR 72451-0339	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	325.00
	Name of Employer Arkansas Methodist Medical Center	Occupation President	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
\[\frac{1}{2}\]	SUBTOTAL of Receipts This Page (optional)		878.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 139 / 261 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	the name and addres	t be sold or used by any perso s of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Melody Trimble, FACHE Mailing Address PO Box 2406			Date of Receipt
City Fort Smith FEC ID number of contributing	State AR	Zip Code 72902-2406	Transaction ID: 18731697 Amount of Each Receipt this Period
federal political committee. Name of Employer Sparks Regional Medical Center Receipt For: Primary General Other (specify)	Occupation Chief Execu Aggregate Ye		325.00
Full Name (Last, First, Middle Initial) Mr. John R Tucker Mailing Address 2801 Medical Cente	r Drive		Date of Receipt 1 1 1 1 6 2 0 1 0
City	State	Zip Code	Transaction ID: 18731698
Pocahontas FEC ID number of contributing federal political committee.	AR C	72455-9436	Amount of Each Receipt this Period 228.00
Name of Employer Five Rivers Medical Center	Occupation Chief Execu	tive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ar-to-Date ▼ 228.00	
Full Name (Last, First, Middle Initial) Ms Patricia G Ball			Date of Receipt
Mailing Address 2800 North Dallas F Suite 200	Parkway		11 1 7 7 2010
City Plano	State TX	Zip Code 75093-5993	Transaction ID: 18731728
FEC ID number of contributing federal political committee.	C	75095-3995	Amount of Each Receipt this Period 1000.00
Name of Employer LHP Hospital Group	Occupation SVP of Stra	tegic Dev & Public Affairs	5
Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ar-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optiona)		1553.00

City Tampa FEC ID number of contributing federal political committee. Name of Employer BayCare Health System Coccupation Chief Operating Officer Receipt For: Date of Receipt Primary General	E A (FEC Form 3X) RECEIPTS	parate schedule(s n category of the d Summary Page	(s)	FOR LINE NUMBER: PAGE 140 / 261 (check only one) X
A. Merican Hospital Association PAC Full Name (Last, First, Middle Initial) Mailing Address 6445 Renwick Circle City State Zip Code Tampa FL 39647-1176 FEC ID number of contributing federal political committee. Name of Employer BayCare Health System Chief Operating Officer Receipt For: Primary General Other (specify) ▼ State Zip Code Transaction ID: 1875251 Amount of Each Receipt the Peri Aggregate Year-to-Date ▼ Transaction ID: 18752525 Amount of Each Receipt the Peri Aggregate Year-to-Date ▼ Transaction ID: 18752525 Amount of Each Receipt the Peri Tampa Date of Receipt Transaction ID: 18752525 Transaction ID: 18752525 Amount of Each Receipt the Peri Tampa Transaction ID: 18752525 Transaction ID: 18755255 Transaction ID: 18755255 Amount of Each Receipt the Peri Tampa Transaction ID: 18755255 Transaction ID: 18755257	opied from such Reports and Stateme purposes, other than using the name	d or used by any y political commit	y person t ittee to so	for the purpose of soliciting contributions olicit contributions from such committee.
Al. Mr. Michael D. Aubin Mailing Address 6445 Renwick Circle City State Zip Code Tampa FL 33647-1176 FEG ID number of contributing federal political committee. Name of Employer BapCare Health Suite 101 City State Zip Code Transaction ID: 18755251 Amount of Each Receipt this Peri Coccupation Chief Operating Officer Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Date of Receipt Amount of Each Receipt this Peri Date of Receipt Transaction ID: 18755252 Amount of Each Receipt this Peri Date of Receipt Transaction ID: 18755252 Amount of Each Receipt this Peri Date of Receipt Transaction ID: 18755252 Amount of Each Receipt this Peri Date of Receipt Transaction ID: 18755252 Amount of Each Receipt this Peri Date of Receipt Transaction ID: 18755252 Amount of Each Receipt this Peri Date of Receipt Transaction ID: 18755252 Amount of Each Receipt this Peri Date of Receipt Transaction ID: 18755252 Amount of Each Receipt this Peri Date of Receipt Transaction ID: 18755255 Amount of Each Receipt this Peri Date of Receipt Transaction ID: 18755255 Amount of Each Receipt this Peri Date of Receipt Transaction ID: 18755255 Amount of Each Receipt this Peri Date of Receipt Transaction ID: 18755257 Amount of Each Receipt this Peri Date of Receipt Transaction ID: 18755257 Amount of Each Receipt this Peri Date of Receipt Transaction ID: 18755257 Amount of Each Receipt this Peri Date of Receipt Transaction ID: 18755257 Amount of Each Receipt this Peri Date of Receipt Transaction ID: 18755257 Amount of Each Receipt this Peri Date of Receipt Transaction ID: 18755257 Amount of Each Receipt this Peri Date of Receipt Transaction ID: 18755257 Amount of Each Receipt this Peri Date of Receipt Transaction ID: 18755257 Amount of Each Receipt this Peri Date of Receipt Transaction ID: 18755257 Amount of Each Receipt this Peri Date of Receipt Transaction ID: 18755257 Amount of Each Receipt this Peri Date of Receipt Transaction	, ,			
City State Zip Code Tampa FL 33647-1176 FEC ID number of contributing federal political committee. Name of Employer Bapticar of contributing federal political committee. Name of Employer Bapticar FC ID number of contributing federal political committee. Name of Employer Bapticar Special State Zip Code Primary General Cocupation City State Zip Code PEC ID number of contributing federal political committee. Name of Employer Baptist Health Mir Paul Clast, First, Middle Initial) Mir Paul Clast Mailing Address PO Box 6000 City State Zip Code Primary General Cocupation Senior Vice President Aggregate Year-to-Date ▼ Date of Receipt Transaction ID: 18755252 Amount of Each Receipt this Perior Senior Vice President Aggregate Year-to-Date ▼ Date of Receipt this Perior Senior Vice President Aggregate Year-to-Date ▼ Primary General Cocupation Senior Vice President President and Chief Executive Officer Aggregate Year-to-Date ▼ Date of Receipt Transaction ID: 18755252 Amount of Each Receipt this Perior Vice President President and Chief Executive Officer Aggregate Year-to-Date ▼ Date of Receipt Transaction ID: 18755257 Amount of Each Receipt this Perior Vice President Amount of Each Receipt this Perior Vice President President and Chief Executive Officer Aggregate Year-to-Date ▼ Date of Receipt Transaction ID: 18755257 Amount of Each Receipt this Perior Vice President ID: 18755257 Amount of Each Receipt this Perior Vice President ID: 18755257 Amount of Each Receipt this Perior Vice President ID: 18755257 Amount of Each Receipt this Perior Vice President ID: 18755257 Amount of Each Receipt To: Receipt To: Receipt Fo: Rece	Aubin			Date of Receipt
Tampa FL 33647-1176 FEC ID number of contributing federal political committee. Name of Employer BayCare Health System Receipt For: Primary General Occupation Chief Operating Officer	ss 6445 Renwick Circle			11 22 2010
FEC ID number of contributing federal political committee. Name of Employer BayCare Health System Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Philip E. Boyce Mailing Address 3563 Phillips Highway Suite 101 City State Zip Code Jacksonville FL 32207-5663 FEC ID number of contributing federal political committee. Name of Employer Baptist Health Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr Paul Clark Mailing Address PO Box 6000 City State Zip Code Primary General Aggregate Year-to-Date ▼ FEC ID number of contributing City State Zip Code Primary General Aggregate Year-to-Date ▼ FEC ID number of contributing federal political committee. City State Zip Code City General General FEC ID number of contributing federal political committee. City State Zip Code				
Receipt For: Primary	er of contributing	7-1170		10.00
Primary General Other (specify) ▼ 360.00 Full Name (Last, First, Middle Initial) Mr. Philip E. Boyce Mailing Address 3563 Phillips Highway Suite 101 City State Zip Code FL 32207-5663 FEC ID number of contributing federal political committee. Name of Employer Baptist Health Receipt For: Primary General Other (specify) ▼ 620.00 Full Name (Last, First, Middle Initial) City State Zip Code FL 32207-5663 Amount of Each Receipt this Period General FL 34478-6000 Full Name (Last, First, Middle Initial) City State Zip Code FL 34478-6000 City State Zip Code FL 34478-6000 FEC ID number of contributing federal political committee. Coccupation State Zip Code FL 34478-6000 FEC ID number of contributing federal political committee. Coccupation President and Chief Executive Officer Receipt For: Aggregate Year-to-Date ▼ Name of Employer Primary General President and Chief Executive Officer Receipt For: Aggregate Year-to-Date ▼	oyer Oc th System Ch	fficer		
Mailing Address 3563 Phillips Highway Suite 101 City State Zip Code FL 32207-5663 FEC ID number of contributing federal political committee. Name of Employer Baptist Health Senior Vice President Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr Paul Clark Mailing Address PO Box 6000 City State Zip Code PL 34478-6000 Date of Receipt Transaction ID: 18755252 Amount of Each Receipt this Perion Senior Vice President Aggregate Year-to-Date ▼ 1 1 2 2 2 2 0 Transaction ID: 18755257 Amount of Each Receipt this Perion Senior Vice President Date of Receipt this Perion Senior Vice President Aggregate Year-to-Date ▼ 10 Date of Receipt Transaction ID: 18755257 Amount of Each Receipt this Perion Senior Vice President and Chief Executive Officer Receipt For: Primary General President and Chief Executive Officer Receipt For: Primary General Primary General President and Chief Executive Officer Receipt For: Primary General Primary General Primary General President and Chief Executive Officer Receipt For: Primary General Page Aggregate Year-to-Date ▼	General	360.00	0	
Suite 101 City State Zip Code FEC ID number of contributing federal political committee. Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr Paul Clark Mailing Address PO Box 6000 City State Zip Code FL 34478-6000 FeC ID number of contributing federal political committee. Date of Receipt Transaction ID: 18755252 Amount of Each Receipt this Peri 20 Transaction ID: 18755252 Amount of Each Receipt this Peri 620.00 Date of Receipt Transaction ID: 18755257 Date of Receipt Transaction ID: 18755257 Amount of Each Receipt for: 20 Transaction ID: 18755257 Amount of Each Receipt his Peri 21 Transaction ID: 18755257 Amount of Each Receipt his Peri C 10 Transaction ID: 18755257 Amount of Each Receipt this Peri Primary General Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼				Date of Receipt
Jacksonville FEC ID number of contributing federal political committee. Name of Employer Bapitst Health Receipt For: Primary General Other (specify) ▼ City Ocala FEC ID number of contributing federal political committee. State Zip Code FL 34478-6000 FEC ID number of contributing federal political committee. Name of Employer Munroe Regional Medical Center Receipt For: Primary General Occupation State Zip Code FL 34478-6000 Cocupation President and Chief Executive Officer Aggregate Year-to-Date ▼ Amount of Each Receipt this Pering this Pering this Pering this Pering to the Primary General Amount of Each Receipt this Pering t				
FEC ID number of contributing federal political committee. Name of Employer Baptist Health Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr Paul Clark Mailing Address PO Box 6000 City State Zip Code FL 34478-6000 FEC ID number of contributing federal political committee. Name of Employer Murrore Regional Medical Center Receipt For: Receipt For: Primary General Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼				
Baptist Health Senior Vice President Receipt For: Primary General Other (specify) ▼	er of contributing	7-5003		20.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr Paul Clark Mailing Address PO Box 6000 City State Zip Code FL 34478-6000 FEC ID number of contributing federal political committee. Name of Employer Munroe Regional Medical Center Receipt For: Primary General Aggregate Year-to-Date ▼ 100 Date of Receipt Transaction ID: 18755257 Amount of Each Receipt this Perion Coccupation President and Chief Executive Officer Aggregate Year-to-Date ▼	, [*]	 Jent		
Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr Paul Clark Mailing Address PO Box 6000 City Ocala FEC ID number of contributing federal political committee. Name of Employer Munroe Regional Medical Center Receipt For: Primary General Date of Receipt Transaction ID: 18755257 Amount of Each Receipt this Perion 10 Cocupation President and Chief Executive Officer Aggregate Year-to-Date ▼		ate V		
Mr Paul Clark Mailing Address PO Box 6000 City State Zip Code Cocala FL 34478-6000 Transaction ID: 18755257 Amount of Each Receipt to 10 Name of Employer Munroe Regional Medical Center Receipt Transaction ID: 18755257 Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ Primary General		620.00	0	
City State Zip Code Ocala FL 34478-6000 FEC ID number of contributing federal political committee. Name of Employer Munroe Regional Medical Center Receipt For: Primary General State Zip Code Transaction ID: 18755257 Amount of Each Receipt this Peri C 10 Aggregate Year-to-Date ▼	st, First, Middle Initial)			Date of Receipt
Ocala FL 34478-6000 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C 10 Name of Employer Munroe Regional Medical Center Occupation President and Chief Executive Officer Receipt For: Aggregate Year-to-Date ▼	ss PO Box 6000			
FEC ID number of contributing federal political committee. Name of Employer Munroe Regional Medical Center Receipt For: Primary General C C 10 Occupation President and Chief Executive Officer Aggregate Year-to-Date 210.00				
Munroe Regional Medical Center Receipt For: Primary President and Chief Executive Officer Aggregate Year-to-Date 310.00	er of contributing	3-6000		Amount of Each Receipt this Period 10.00
Receipt For: Aggregate Year-to-Date ▼ Primary General		ef Executive O	Officer	
	General		0	
SUBTOTAL of Receipts This Page (optional)	Receipts This Page (optional)			40.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 141 / 261 (check only one) X 11a
	Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
∠ A.	Full Name (Last, First, Middle Initial) Mr. Ralph Glatfelter Mailing Address 7285 Heartland Circle City Tallahassee FEC ID number of contributing	State FL	Zip Code 32312-7501	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Employer Florida Hospital Association Receipt For: Primary Other (specify) ▼	Occupatio Senior V	ice President e Year-to-Date ▼ 1830.00	
- З.	Full Name (Last, First, Middle Initial) Mr. Lars D Houmann Mailing Address 601 East Rollins Street			Date of Receipt 1 1 2 2 2 2 0 1 0
	City Orlando	State FL	Zip Code	Transaction ID: 18755275
	FEC ID number of contributing federal political committee.	C	32803-1248	Amount of Each Receipt this Period 10.00
	Name of Employer Florida Hospital	Occupatio Presiden		
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 1210.00	
-).	Full Name (Last, First, Middle Initial) Mr. Steven M Johnson Mailing Address P O Box 59515			Date of Receipt
	City	State	Zip Code	1 1 2 2 2 1 0 1 0 Transaction ID: 18755277
	Panama City	FL	32402-2515	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Name of Employer Bay Medical Center	Occupatio Presiden	n It and Chief Executive Office	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 620.00	
	SUBTOTAL of Receipts This Page (optional)			60.00
r	TOTAL This Period (last page this line number of	naly)	·	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 142 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16
An	y information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may name and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions
	Full Name (Last, First, Middle Initial) Mr. Joe Johnson Mailing Address 1055 Saxon Boulevard City	State	Zip Code	Date of Receipt M M 22 2010
	Orange City FEC ID number of contributing federal political committee.	FL C	32763-8468	Transaction ID: 18755278 Amount of Each Receipt this Period 120.00
	Name of Employer Florida Hospital Fish Memorial Receipt For: Primary General Other (specify) ▼		n t and Chief Executive Officer e Year-to-Date ▼ 620.00	
	Full Name (Last, First, Middle Initial) Mr. Keith Lundquist Mailing Address 1600 Sunny Brook Lan	е		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 18755307
	Palm Bay	<u>FL</u>	32905-6527	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		20.00
	Name of Employer Health First, Inc.	Occupatio Vice Pres	n sident Marketing and Commu	unitv
	Receipt For: Primary General Other (specify) ▼	'	e Year-to-Date ▼ 320.00	
	Full Name (Last, First, Middle Initial) Mr. Michael D Means Mailing Address 6450 US Highway 1			Date of Receipt
	City	State	Zip Code	1 1 2 2 2 0 1 0 Transaction ID: 18755309
	Rockledge	FL	32955-5747	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer Health First, Inc.	Occupatio Presiden	n t and Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1185.00	
s	UBTOTAL of Receipts This Page (optional)		.	180.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 143 / 261 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any pers name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. John E. Mines Mailing Address 1991 Killarney Drive City Winter Park FEC ID number of contributing	State Zip Code FL 32789-3527	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Florida Hospital Association Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Senior Vice President Aggregate Year-to-Date 1021.00]
Full Name (Last, First, Middle Initial) Mr James Mondello Mailing Address 1204 NW Winters Cre	ek Rd	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18755311
Palm City	FL 34990-8086	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer Martin Memorial Health Sy-	Occupation Trustee	
stems Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	
Full Name (Last, First, Middle Initial) Ms. Phillis Oeters		Date of Receipt
Mailing Address 6855 Red Road, Suite	600	11 22 2 2010
City	State Zip Code	Transaction ID: 18755337
Miami FEC ID number of contributing federal political committee.	FL 33143-3632	Amount of Each Receipt this Period 500.00
Name of Employer Baptist Health South Flor- ida	Occupation Corporate Vice President Governme	nt an
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
		540.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 144 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Report or for commercial purposes, other than use NAME OF COMMITTEE (In Full) American Hospital Association I	s and Statements may not be sold or used by any persor sing the name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Stephen A Purves, , FACHE Mailing Address P O Box 6000 City Ocala FEC ID number of contributing federal political committee. Name of Employer Munroe Regional Medical Center Receipt For: Primary General Other (specify)	State Zip Code FL 34478-6000 C Occupation President and Chief Executive Officer Aggregate Year-to-Date 1110.00	Date of Receipt M M M / D D / Y Y Y Y Y Y 1 1 2 2 2 2 0 1 0 Transaction ID: 18755341 Amount of Each Receipt this Period 10.00
Full Name (Last, First, Middle Initial) Mr. Mark E. Robitaille Mailing Address 53 S. River Road City Stuart FEC ID number of contributing federal political committee. Name of Employer Martin Memorial Health Systems Receipt For: Primary General Other (specify)	State Zip Code FL 34996-6723 C Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ 1110.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr Timothy K Skeldon Mailing Address 951 North Wash City Titusville FEC ID number of contributing federal political committee. Name of Employer Parrish Medical Center Receipt For: Primary General Other (specify)	State Zip Code FL 32796-2194 C Occupation Senior Vice President and Chief Finan Aggregate Year-to-Date	Date of Receipt M M D D Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (opti	onal)	430.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 145 / 261 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any personne name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Alfred G Stubblefield		Date of Receipt
Mailing Address 1717 North 'E' Street	, Ste 320	1 1 2 2 2 2 0 1 0
City Pensacola	State Zip Code FL 32501-6377	Transaction ID: 18755349 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	140.00
Name of Employer Baptist Health Care Corpo- ration	Occupation President	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1140.00	
Full Name (Last, First, Middle Initial) Mr. Daryl Tol Mailing Address 701 West Plymouth	A	Date of Receipt
Mailing Address 701 West Plymouth	Avenue	11 22 4 2010
City Deland	State Zip Code FL 32720-3236	Transaction ID: 18755351
FEC ID number of contributing federal political committee.	C 32720-3230	Amount of Each Receipt this Period 30.00
Name of Employer Florida Hospital DeLand	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 530.00	
Full Name (Last, First, Middle Initial) Dr. Allen S Weiss, , M.D.		Date of Receipt
Mailing Address P O Box 413029		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18755357
Naples FEC ID number of contributing federal political committee.	FL 34101-3029	Amount of Each Receipt this Period 500.00
Name of Employer NCH Downtown Naples Hospi- tal	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		670.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 146 / 261 (check only one) X 11a
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)		
Mr. Melvyn Patashnick Mailing Address 528 Washington Hi	ghway	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18756355
Morrisville	VT 05661-8973	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Copley Hospital	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Ms. Paula Minnehan		Date of Receipt
Mailing Address 283 Gallopiny Hill F	Road	M M / D D / Y Y Y Y Y Y Y Y 1 1 1 2 2 2 2 0 1 0
City	State Zip Code	Transaction ID: 18756427
<u>Hopkinton</u>	NH 03229-3402	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer New Hampshire Hospital As- sociation	Occupation V.P., Finance and Rural Hospitals	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 240.00	
Full Name (Last, First, Middle Initial) Mr. Steve M. Ahnen		Date of Receipt
Mailing Address 125 Airport Road		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18756428
Concord	NH 03301-7300	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.33
Name of Employer New Hampshire Hospital As- sociation	Occupation President and CEO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	666.68	
		463.33

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 147 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Peter L Gosline		Date of Receipt
Mailing Address 452 Old Street Road	Charles 7th Conde	1 1 1 9 2 0 1 0
City Peterborough	State Zip Code NH 03458-1295	Transaction ID: 18756430 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Monadnock Community Hospi- tal	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Scott W Howe		Date of Receipt
Mailing Address 173 Middle Street		11 19 2010
City	State Zip Code	Transaction ID: 18756431
Lancaster	NH 03584-3508	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Weeks Medical Center	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Ms. Patricia R. Goldman		Date of Receipt
Mailing Address 9 Farm Haven Court		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18756432
Rockville	MD 20852-4231	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Associate Director	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)		1200.00
TOTAL This Period (last page this line number	·	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 148 / 261 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may he name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. J. Steve Perry			Date of Receipt
Mailing Address P O Box 579 City	State	Zip Code	1 1 2 2 2 2 2 0 1 0 Transaction ID: 18756435
Afton FEC ID number of contributing federal political committee.	C	83110-0579	Amount of Each Receipt this Period 250.00
Name of Employer Star Valley Medical Center	Occupation Chief Exe	n ecutive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00]
Full Name (Last, First, Middle Initial) Mr. Ron O. Purcell Mailing Address 1093 N. Faldo Way			Date of Receipt
City	State	Zip Code	1 1 2 2 2 0 1 0 Transaction ID: 18756440
<u>Eagle</u>	ID	83616-5369	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		62.50
Name of Employer American Hospital Associa- tion-Chicago	_	Executive	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 522.50]
Full Name (Last, First, Middle Initial) Mr. Robert C Khayat, Jr.			Date of Receipt
Mailing Address 223 Superior Avenue	9		11 16 2010
City	State	Zip Code	Transaction ID: 18756443
Decatur	GA	30030-1816	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		385.00
Name of Employer King & Spalding Receipt For:	_, -	Govt. Relations	
Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 385.00	
SUBTOTAL of Receipts This Page (optional)	•		697.50

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 149 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American Hospital Association PAC	I Statements may not be sold or used by any personal statements may not be sold or used by any personal statements and address of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Anthony James Budzinski Mailing Address PO Box 1518 City Brunswick FEC ID number of contributing federal political committee. Name of Employer WellStar Health System Receipt For: Primary General	State Zip Code GA 31521-1518 C Occupation Interim President & CEO Aggregate Year-to-Date	Date of Receipt 1 1
Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Edmond R. Jordan Mailing Address 201 Graylyn Drive City Anderson FEC ID number of contributing	State Zip Code SC 29621-1985	Date of Receipt M M M J D D J D Z D 1 0 Transaction ID: 18756516 Amount of Each Receipt this Period 500.00
Name of Employer AnMed Health Medical Center Receipt For: Primary Other (specify)	Occupation Director of Urgent Care Aggregate Year-to-Date 500.00]
Full Name (Last, First, Middle Initial) Mr Jerry A Parrish Mailing Address 107 Nottingham Cou	ırt State Zip Code	Date of Receipt 1 1 1 6 2 0 1 0
City Anderson FEC ID number of contributing federal political committee.	Sc 29621-2840	Transaction ID: 18756517 Amount of Each Receipt this Period 250.00
Name of Employer AnMed Health Medical Center Receipt For: Primary General Other (specify)	Occupation Vice President Aggregate Year-to-Date 250.00	
SUBTOTAL of Receipts This Page (optional)		1250.00

	IEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 150 / 261 (check only one) X 11a
or for	formation copied from such Reports and St commercial purposes, other than using the ME OF COMMITTEE (In Full) merican Hospital Association PAC	tatements may name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Mr.	Il Name (Last, First, Middle Initial) . Mark S Nantz illing Address One St Francis Drive			Date of Receipt
Cit Gr	y reenville	State SC	Zip Code 29601-3999	Transaction ID: 18756518 Amount of Each Receipt this Period
FE	C ID number of contributing leral political committee.	С		250.00
<u>He</u>	me of Employer n Secours St. Francis salth System ceipt For: Primary General Other (specify)		ecutive Officer Year-to-Date 250.00	
Ms	II Name (Last, First, Middle Initial) Suzanne White illing Address 701 Grove Road			Date of Receipt 1 1 1 1 6 2 0 1 0
Cit	у	State	Zip Code	Transaction ID: 18756519
<u>Gr</u>	reenville	SC	29605-5611	Amount of Each Receipt this Period
	C ID number of contributing leral political committee.	С		250.00
Na Gr	me of Employer eenville Hospital System	Occupation Vice Pres	n sident, Chief Nursing Officer	
Re	ceipt For: Primary General Other (specify) ♥	Aggregate	Year-to-Date ▼ 500.00	
	II Name (Last, First, Middle Initial) . Stuart Smith			Date of Receipt
Ма	iling Address 169 Ashley Avenue			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Cit	~	State	Zip Code	Transaction ID: 18756520
FE	narleston C ID number of contributing leral political committee.	SC C	29425-8905	Amount of Each Receipt this Period 500.00
Na Ml <u>dic</u>	me of Employer JSC Medical Center of Me- al Univers	Occupation Vice Pres	n sident Clinical Operations	
	ceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
SUB	FOTAL of Receipts This Page (optional)		_	1000.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 151 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	American Hospital Association PAC		
Α.	Full Name (Last, First, Middle Initial) Mr. Jay Kirby Mailing Address 26 Moise Drive		Date of Receipt
	City	State Zip Code	11 16 2010
	Sumter Sumter	SC 29150-4235	Transaction ID: 18756521 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Self Regional Healthcare	Occupation Vice President, Support Services	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
- В.	Full Name (Last, First, Middle Initial) Mr. James A Pfeiffer, , FACHE Mailing Address 1995 Spring Street		Date of Receipt
	Mailing Address 1325 Spring Street		11 16 2010
	City Greenwood	State Zip Code SC 29646-3860	Transaction ID: 18756522 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Self Regional Healthcare	Occupation President and Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
с. С.	Full Name (Last, First, Middle Initial) Mr. Craig White		Date of Receipt
	Mailing Address 503 Lodge Drive		1 1 1 6 2 0 1 0
	City Greenwood	State Zip Code SC 29646-1919	Transaction ID: 18756523
	FEC ID number of contributing federal political committee.	C 29040-1919	Amount of Each Receipt this Period 250.00
	Name of Employer Self Regional Healthcare	Occupation VP Foundation/Compliance	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional) .		1000.00
	TOTAL This Period (last page this line number	·	

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 152 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any pers name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Gregg Martin Mailing Address 2252 Rolling Hill Lane City	State Zip Code	Date of Receipt M
Sumter	SC 29150-1934	Transaction ID: 18756524 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Tuomey Healthcare System Receipt For: Primary General Other (specify) ▼	Occupation Senior Vice President & COO Aggregate Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) Ms. Gayle Capozzalo Heil Mailing Address 789 Howard Avenue		Date of Receipt
City	State Zip Code	Transaction ID: 18756526
New Haven	CT 06519-1304	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Yale New Haven Health Sys- tem	Occupation Executive Vice President	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Vincent Petrini		Date of Receipt
Mailing Address 20 York Street		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18756527
New Haven	CT 06510-3220	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Yale New Haven Health Sys- tem	Occupation Senior VP of Public Affairs	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		850.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 153 / 261 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and S or for commercial purposes, other than using the	, -	13 14 15 16 n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAC	name and address of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Patricia Susan Fitzsimons		Date of Receipt
Mailing Address 20 York Street		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18756529
New Haven	CT 06510-3220	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Yale-New Haven Hospital	Occupation Sr. Vice President of Patient Services	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr. Frank A Corvino		Date of Receipt
Mailing Address 5 Perryridge Road		M M / D D / Y Y Y Y Y Y Y Y 1 1 1 1 9 2 0 1 0
City	State Zip Code	Transaction ID: 18756530
Greenwich	CT 06830-4697	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Greenwich Hospital	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Kevin A. Myatt		Date of Receipt
Mailing Address 20 York Street		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18756531
New Haven	CT 06510-3220	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Yale-New Haven Hospital	Occupation Sr. V.P., Human Resources	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	<u> </u>	1000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 154 / 261 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any personal tension in the sold or used by any personal tension in the sold or used by any personal tension in the sold or used by any personal tension in the sold or used by any personal tension in the sold or used by any personal tension in the sold or used by any personal tension in the sold or used by any personal tension in the sold or used by any personal tension in the sold or used by any personal tension in the sold or used by any personal tension in the sold or used by any personal tension in the sold or used by any personal tension in the sold or used by any personal tension in the sold or used by any personal tension in the sold or used by any personal tension in the sold of the sold or used by any personal tension in the sold of the sold	on for the purpose of soliciting contributions is solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Norman G. Roth Mailing Address 20 York Street City New Haven	State Zip Code CT 06510-3220	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Yale New Haven Health System	Occupation Senior Vice President	250.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr Richard D'Aquila Mailing Address 789 Howard Avenue		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18756533
New Haven FEC ID number of contributing federal political committee.	CT 06519-1304	Amount of Each Receipt this Period 350.00
Name of Employer Yale New Haven Health Sys- tem	Occupation Executive Vice President and COO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Peter J Karl		Date of Receipt
Mailing Address 71 Haynes Street		1 1 1 9 2 0 1 0
City	State Zip Code	Transaction ID: 18756536
Manchester FEC ID number of contributing federal political committee.	CT 06040-4131	Amount of Each Receipt this Period 250.00
Name of Employer Eastern Connecticut Health Network	Occupation President and Chief Executive Office	r
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		850.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 155 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person ename and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Christopher M Dadlez Mailing Address 490 Blue Hills Avenue City	State Zip Code	Date of Receipt 1 1 1 9 2 0 1 0 Transaction ID: 18756541
Hartford FEC ID number of contributing federal political committee. Name of Employer Saint Francis Hospital and Medical Cen Receipt For: Primary General Other (specify)	CT 06112-1513 C Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ 1000.00	Amount of Each Receipt this Period 1000.00
Full Name (Last, First, Middle Initial) Ms. Crystal L. Haynes Mailing Address 3924 Flora Place City	State Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
Saint Louis FEC ID number of contributing federal political committee.	MO 63110-3733	Amount of Each Receipt this Period 1000.00
Name of Employer Saint Louis University Ho- spital Receipt For: Primary General Other (specify) ▼	Occupation Chief Executive Officer Aggregate Year-to-Date 1000.00	
Full Name (Last, First, Middle Initial) Mr. William K Mahoney Mailing Address P O Box 650		Date of Receipt
City Branson	State Zip Code MO 65615-0650	1 1 1 6 2 0 1 0 Transaction ID: 18756566 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Skaggs Regional Medical Center Receipt For: Primary General Other (specify)	Occupation President and Chief Executive Officer Aggregate Year-to-Date 300.00	
SUBTOTAL of Receipts This Page (optional)		2300.00

Full Name Mr. W Sco Mailing Ac City South H FEC ID n	ercial purposes, other than using the F COMMITTEE (In Full) an Hospital Association PAC e (Last, First, Middle Initial) of Burnette ddress PO Box 90	State VA	not be sold or used by any person ress of any political committee to Zip Code	Date of Receipt M M
Full Name Mr. W Sco Mailing Ad City South H FEC ID n	e (Last, First, Middle Initial) ott Burnette ddress POBox 90	VA	Zip Code	M M / D D / Y Y Y Y
Mr. W Sco Mailing Ad City South H	ddress POBox 90	VA	Zip Code	M M / D D / Y Y Y Y
City South H	lill umber of contributing	VA	Zip Code	11 16 2010
South H	umber of contributing	VA	Zip Code	T :: ID 107FCC14
			23970-0090	Transaction ID: 18756614 Amount of Each Receipt this Period
rederal pe	olitical committee.	C		350.00
Name of I Communi center	Employer ity Memorial Health-	Occupation President	and Chief Executive Office	r
	or: nary General er (specify) ♥	Aggregate	Year-to-Date ▼ 350.00	
Mr. Jeffrey		1		Date of Receipt
Mailing A	ddress 925 Ditchley Rd			1 1 1 1 6 2 0 1 0
City		State	Zip Code	Transaction ID: 18756616
	Beach umber of contributing litical committee.	C	23451-3740	Amount of Each Receipt this Period 350.00
Name of I Sentara F	Employer Healthcare	Occupation Legal Cou		
	or: nary General er (specify) ♥	Aggregate	Year-to-Date ▼ 350.00	
	e (Last, First, Middle Initial) ne Vrotsos			Date of Receipt
Mailing A	ddress 2653 Park Tower Driv	/e		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Vienna		State VA	Zip Code 22180-7386	Transaction ID: 18756619
FEC ID n	umber of contributing slitical committee.	C	22100-7300	Amount of Each Receipt this Period 350.00
<u>Arlington</u>	lospital Center -		sing Officer	
	or: nary General er (specify) ♥	Aggregate	Year-to-Date ▼ 350.00	
SUBTOTAL	of Receipts This Page (optional) .	1		1050.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 157 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any perse name and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Bruce Werness, MD Mailing Address 10020 Park Royal Driv City Great Falls FEC ID number of contributing federal political committee.	State Zip Code VA 22066-1847 C	Date of Receipt 1 1
Name of Employer Inova Fair Oaks Hospital Receipt For: Primary General Other (specify) ▼	Director/Dept of Pathology Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr Ralph Whatley Mailing Address 85 Stoneledge Dr		Date of Receipt 1 1 1 1 6 2 0 1 0
City	State Zip Code	Transaction ID: 18756621
Roanoke	VA 24019-8503	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Carilion Clinic	Occupation Medical Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Ms. Sharon Zrioka		Date of Receipt
Mailing Address 5109 Wyndham Rose	Cove	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18756622
Centreville	VA 20120-4138	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	350.00
Name of Employer Inova Health System	Occupation Director Home Health	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
	L	

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 158 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Repo or for commercial purposes, other than NAME OF COMMITTEE (In Full) American Hospital Association	rts and Statements may not be sold or used by any persousing the name and address of any political committee to PAC	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Carl Biggs Mailing Address 2225 Aryness I City Vienna	Orive State Zip Code VA 22181-3047	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Inova Health System Receipt For: Primary General Other (specify)	Occupation Trustee Aggregate Year-to-Date ▼ 350.00	350.00
Full Name (Last, First, Middle Initial) Ms. Patricia L. Robertson Mailing Address 205 Oxford Cir		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Richmond FEC ID number of contributing federal political committee. Name of Employer Bon Secours St. Mary's Hospital Receipt For: Primary General Other (specify)	State Zip Code VA 23221-3250 C Occupation Executive Vice President & Administration Aggregate Year-to-Date 350.00	Transaction ID: 18756624 Amount of Each Receipt this Period 350.00
Full Name (Last, First, Middle Initial) Mr. Joseph A. Carr Mailing Address 2378 Orchard	Crest Blvd.	Date of Receipt
City Manasquan FEC ID number of contributing federal political committee.	State Zip Code NJ 08736-4001	Transaction ID: 18756628 Amount of Each Receipt this Period 10.00
Name of Employer New Jersey Hospital Association Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Chief Information Officer Aggregate Year-to-Date 230.00	
SUBTOTAL of Receipts This Page (or	otional)	710.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 159 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may name and add	not be sold or used by any perso ress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) Ms. Jessica Cohen Mailing Address 760 Alexander Road			Date of Receipt
	City Princeton	State NJ	Zip Code 08540-6305	Transaction ID: 18756633 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Assoc-	Occupation	1	10.00
	iation Receipt For: Primary Other (specify) ▼	Director Aggregate	Year-to-Date ▼ 225.00	
3.	Full Name (Last, First, Middle Initial) Ms. Belinda Brown Cooper Mailing Address 121 Clear Creek Road			Date of Receipt 1 1 1 9 2 0 1 0
	City	State	Zip Code	Transaction ID: 18756635
	Langhorne FEC ID number of contributing federal political committee.	PA C	19047	Amount of Each Receipt this Period 10.00
	Name of Employer New Jersey Hospital Assoc- iation Receipt For:		n ident, Human Resources Year-to-Date ▼	
	Primary General Other (specify) ▼	riggiogato	230.00	
-).	Full Name (Last, First, Middle Initial) Mr John A DiAngelo Mailing Address 105 Pancoast Place			Date of Receipt
	City	State	Zip Code	1 1 1 9 2 0 1 0 Transaction ID: 18756641
	Mullica Hill	NJ	08062-4735	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer South Jersey Healthcare	Occupation Senior Vid	n ce President Finance and C	hi e
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)			270.00
ſ	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 160 / 261 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any persole name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Mary A. Ditri Mailing Address 9 Jumping Brook Driv	/e	Date of Receipt 1 1 1 9 2 0 1 0
City	State Zip Code	Transaction ID: 18756642
Neptune FEC ID number of contributing federal political committee.	NJ 07753-3326	Amount of Each Receipt this Period 10.00
Name of Employer New Jersey Hospital Association Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Director Aggregate Year-to-Date 220.00	
Full Name (Last, First, Middle Initial) Ms. Theresa L. Edelstein Mailing Address 27 Harvest Lane	_ L	Date of Receipt 1 1 1 9 2 0 1 0
City	State Zip Code	Transaction ID: 18756645
Livingston	NJ 07039-2750	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer New Jersey Hospital Assoc- jation	Occupation Vice President Continuing Care Servi	ce
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 430.00	
Full Name (Last, First, Middle Initial) Mr. Erich Florentine		Date of Receipt
Mailing Address 9 Wyncroft Drive		1 1 1 9 2 0 1 0
City	State Zip Code	Transaction ID: 18756647
Woodbine	NJ 08270-3503	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer South Jersey Healthcare	Occupation Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		270.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 161 / 261 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	statements may not be sold or used by any personame and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Sean J. Hopkins Mailing Address 6180 Lower Mountain	Road	Date of Receipt M M M
City	State Zip Code	Transaction ID: 18756653
New Hope	PA 18938	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.83
Name of Employer New Jersey Hospital Assoc- iation	Occupation Sr. VP., Health Economics	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 674.18	
Full Name (Last, First, Middle Initial) Mr. Fredrick J. Jacobs	_	Date of Receipt
Mailing Address 23 E. Delaware Avenu	е	1 1 1 9 2 0 1 0
City	State Zip Code	Transaction ID: 18756655
Pennington	NJ 08534-2302	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer New Jersey Hospital Assoc- iation	Occupation General Counsel	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 230.00	
Full Name (Last, First, Middle Initial) Mr. Richard J Kathrins		Date of Receipt
Mailing Address 1442 Sauvignon Drive		11 1 19 / Y Y Y Y Y
City Tomo Pivor	State Zip Code NJ 08753-2763	Transaction ID: 18756658
Toms River		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Bacharach Institute for Rehabilitation Receipt For:	Occupation President and Chief Executive Office	er
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
		560.83

SCHEDULE A (FEC Form	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 162 / 261 (check only one) X
Any information copied from such Reports or for commercial purposes, other than us NAME OF COMMITTEE (In Full) American Hospital Association F	and Statements may not be sold or used by any persoing the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. William D. Kennedy Mailing Address 1549 North Valle City	y Road State Zip Code	Date of Receipt M M D D Y Y Y Y Y Y Y
<u>Malvern</u>	PA 19355	Transaction ID: 18756659 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 19933	10.00
Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify) ▼	Occupation Senior Vice President Aggregate Year-to-Date ▼ 230.00	
Full Name (Last, First, Middle Initial) Mr. Timothy J. Keough Mailing Address 23 Nelson Drive		Date of Receipt 1 1 1 9 2 0 1 0
City	State Zip Code	Transaction ID: 18756660
<u>Barnegat</u>	NJ 08005-2174	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer New Jersey Hospital Assoc- iation	Occupation Vice President, Health Information Mo	gm
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	
Full Name (Last, First, Middle Initial) Mr. Steve E. Krebs		Date of Receipt
Mailing Address 73 Tindall Rd		11 19 YYYY 110 19 2010
City	State Zip Code	Transaction ID: 18756662
Robbinsville	NJ 08691-2508	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer New Jersey Hospital Assoc- iation	Occupation Director, Conference Services	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	
CURTOTAL (D Till D / . ii	onal)	30.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 163 / 261 (check only one)
Any information copied from such Reports and or for commercial purposes, other than using the such as	d Statements may	y not be sold or used by any perso	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		,,,	
Full Name (Last, First, Middle Initial) Mr. David P. Lavins			Date of Receipt
Mailing Address 10 Fox Chase Road			M M / D D / Y Y Y Y Y 1 Y 1 1 1 1 9 2 0 1 0
City	State	Zip Code	Transaction ID: 18756668
Malvern FEC ID number of contributing federal political committee.	C	19355	Amount of Each Receipt this Period 10.00
Name of Employer New Jersey Hospital Association Receipt For: Primary Other (specify) ▼		n ancial Officer Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Mr. Alan Lieber Mailing Address 4 Sun Watch Court			Date of Receipt
City	State	Zip Code	1 1 1 9 2 0 1 0 Transaction ID: 18756669
Ramsey	NJ	07446-2123	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Atlantic Health	Occupation Presiden		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial)			Date of Receipt
Ms. Amy B Mansue Mailing Address 17 Powell Court			M M / D D / Y Y Y Y Y Y Y 1 1 1 1 9 2 0 1 0
City	State	Zip Code	Transaction ID: 18756676
Hightstown FEC ID number of contributing federal political committee.	NJ C	08520-3014	Amount of Each Receipt this Period 781.50
Name of Employer Children's Specialized Ho- spital	_, -	t and Chief Executive Officer	-
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1563.00	
			1291.50

St. Joseph's Régional Medical Center Receipt For: Primary General	State Zip Code NJ 07020-1662 C Occupation President and Chief Executive Officer Aggregate Year-to-Date 1000.00	Date of Receipt Date of Receipt
Mr. William A McDonald Mailing Address 502 Rutledge Court City Edgewater FEC ID number of contributing federal political committee. Name of Employer St. Joseph's Regional Medical Center Receipt For: Primary General	NJ 07020-1662 C Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ 1000.00	Transaction ID: 18756681 Amount of Each Receipt this Period 500.00
Edgewater FEC ID number of contributing federal political committee. Name of Employer St. Joseph's Regional Medical Center Receipt For: Primary General	NJ 07020-1662 C Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ 1000.00	Amount of Each Receipt this Period 500.00
ical Center Receipt For: Primary General	President and Chief Executive Officer Aggregate Year-to-Date ▼ 1000.00	Date of Receipt
Other (specify) ▼		Date of Receipt
Full Name (Last, First, Middle Initial) Ms. Kerry A. McKean-Kelly Mailing Address 40 Imlaystown Road		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18756683
East Windsor FEC ID number of contributing federal political committee.	NJ 08520-6209	Amount of Each Receipt this Period
Now Jorgan Hospital Accord	Occupation Assistant Vice President Aggregate Year-to-Date	- -
Primary General Other (specify) ▼	230.00	
Full Name (Last, First, Middle Initial) Mr. Randall J. Minniear Mailing Address 3901 Worthington Court		Date of Receipt
	Olate 7's Oads	11 19 2010
City Freehold	State Zip Code NJ 07728	Transaction ID: 18756688 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
New Jersey Hospital Assoc- iation	Occupation Senior VP, Government Relations	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	
SUBTOTAL of Receipts This Page (optional)		520.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 165 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 11
C	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	American Hospital Association PAC		
۸.	Full Name (Last, First, Middle Initial) Ms. Joann M. Morgano Mailing Address 7 Cottonwood Drive		Date of Receipt
	City	State Zip Code	1 1 1 9 2 0 1 0 Transaction ID: 18756692
	Lumberton	NJ 08048-5297	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	10.00
	Name of Employer New Jersey Hospital Assoc- iation	Occupation Director, Marketing & Communication	ns
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	
 3.	Full Name (Last, First, Middle Initial) Mr. Ronald Rak		Date of Receipt
	Mailing Address 34 Federal City Road		11 1 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 18756703
	Ewing	NJ 08638-1321	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Saint Peter's University Hospital	Occupation President	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1000.00	
 ;.	Full Name (Last, First, Middle Initial) Ms. Sally Roslow		Date of Receipt
	Mailing Address 21 Sparrow Walk		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 18756708
	Newtown FEC ID number of contributing federal political committee.	PA 18940	Amount of Each Receipt this Period 10.00
	Name of Employer New Jersey Hospital Assoc- iation	Occupation VP Development & Trustee Relations	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 230.00	
Γ	SUBTOTAL of Receipts This Page (optional)		520.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 166 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Roger D. Sarao, Jr. Mailing Address 4 Poppy Lane City	State Zip Code	Date of Receipt 1 1 1 9 2 0 1 0 Transaction ID: 18756713
Howell FEC ID number of contributing federal political committee.	NJ 07731-1451	Amount of Each Receipt this Period
Name of Employer New Jersey Hospital Association Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation VP Health Economics Aggregate Year-to-Date 230.00	
Full Name (Last, First, Middle Initial) Ms. Cynthia A. Sorg Mailing Address 33 Second Street		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18756723
Hopewell FEC ID number of contributing federal political committee.	NJ 08525-2014	Amount of Each Receipt this Period 10.00
Name of Employer New Jersey Hospital Assoc- iation Receipt For:	Occupation Assistant to President Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	230.00	
Full Name (Last, First, Middle Initial) Mr. Steven R. Michaud		Date of Receipt
Mailing Address 7 Ivanhoe Drive		11 1 16 YYYYY 2010
City Topsham	State Zip Code ME 04086-6109	Transaction ID: 18756774 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Maine Hospital Association	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		270.00
TOTAL This Period (last page this line number	only)	

SCHEDULE A (FEC FOITEMIZED RECEIPTS	for	e separate schedule(s) each category of the tailed Summary Page	FOR LINE NUMBER: PAGE 167 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such I or for commercial purposes, other to NAME OF COMMITTEE (In Fu American Hospital Associa	nan using the name and address o	e sold or used by any perso of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Ir Mr. Richard Petersen Mailing Address 120 Fickett City	Street	ip Code	Date of Receipt 1 1 1 6 2 0 1 0 Transaction ID: 18756776
South Portland		4106-6874	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Maine Medical Center	Occupation Chief Operatin	g Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-	to-Date ▼ 250.00	
Full Name (Last, First, Middle Ir Mr. Matthew J. Angela Mailing Address 1151 East	,		Date of Receipt
			11 19 2010
City Naperville		ip Code	Transaction ID: 18756803
FEC ID number of contributing federal political committee.	C	0563-9339	Amount of Each Receipt this Period
Name of Employer Illinois Hospital Associa- tion	Occupation Senior Directo	r	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-	to-Date ▼ 400.00	
Full Name (Last, First, Middle Ir Mr Peter W Butler	itial)		Date of Receipt
	Congress Parkway		1 1 1 9 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		ip Code	Transaction ID: 18756804
Skokie FEC ID number of contributing federal political committee.	IL 6	0612-3864	Amount of Each Receipt this Period 300.00
Name of Employer Rush University Medical Center		President and Chief C)pe
Receipt For: Primary General Other (specify) ▼	Aggregate Year-	to-Date ▼ 800.00	
	e (optional)		700.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 168 / 261 (check only one) X 11a 11b 11c 12 15 16 17
or for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to s	for the purpose of soliciting contributions olicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr J.R. Clapp		Date of Receipt
Mailing Address 3513 N. Fremont St Apt. 1 City	State Zip Code	1 1 1 9 2 0 1 0 Transaction ID: 18756805
<u>Chicago</u>	IL 60657-2992	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer Rush University Medical Center	Occupation Senior Vice President, Hospital Affair	-
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) Mr. Edgar J Curtis		Date of Receipt
Mailing Address 701 North First Street		111 19 2010
City	State Zip Code	Transaction ID: 18756806
Springfield	IL 62781-0001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Memorial Medical Center	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	
Full Name (Last, First, Middle Initial) Mr. Kevin R. England		Date of Receipt
Mailing Address 1800 Grist Mill Drive		1 1 1 1 9 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18756807
Springfield	IL 62711-8113	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Memorial Health System	Occupation Vice President, Business Development	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	800.00	
SUBTOTAL of Receipts This Page (optional) .		1450.00
TOTAL This Period (last page this line number	<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 169 / 261 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any personal ename and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. David S. Fox Mailing Address 3815 Highland Avenu	е	Date of Receipt 1 1 1 9 2 0 1 0
City	State Zip Code	Transaction ID: 18756808
Downers Grove	IL 60515-1500	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	600.00
Name of Employer Advocate Good Samaritan Hospital	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) Dr. Wayne M Lerner, , DPH Mailing Address 2701 West 68th Street	nt .	Date of Receipt
Walling Address 2701 West Ooth Street	5t	11 19 2010
City	State Zip Code	Transaction ID: 18756809
Chicago	IL 60629-1813	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	600.00
Name of Employer Holy Cross Hospital	Occupation President and Chief Executive Office	r
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) Ms. Connie L Schroeder		Date of Receipt
Mailing Address 640 West Washingto	n Street	M M / D D / Y Y Y Y Y 1 1 1 1 9 2 0 1 0
City	State Zip Code	Transaction ID: 18756810
Pittsfield	IL 62363-1350	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Illini Community Hospital	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	
SUBTOTAL of Receipts This Page (optional)		1500.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 170 / 261 (check only one) X 11a
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		· ·	
Full Name (Last, First, Middle Initial) Mr. Paul M. Teodo			Date of Receipt
Mailing Address 2701 West 68th Str	eet		M M / D D / Y Y Y Y Y 1 1 1 1 9 2 0 1 0
City Chicago	State IL	Zip Code 60629-1813	Transaction ID: 18756811
FEC ID number of contributing federal political committee.	C	00029-1013	Amount of Each Receipt this Period 150.00
Name of Employer Holy Cross Hospital	Occupation Chief Op	n erating Officer	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) Mr. Darryl L Vandervort	.		Date of Receipt
Mailing Address 403 East First Stree	t		1 1 1 9 2 0 1 0
City	State	Zip Code	Transaction ID: 18756812
<u>Dixon</u> FEC ID number of contributing federal political committee.	C	61021-3187	Amount of Each Receipt this Period 300.00
Name of Employer Katherine Shaw Bethea Hos- pital	Occupation Presiden	n t and Chief Executive Office	r
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 800.00	
Full Name (Last, First, Middle Initial) Mr. Douglas Young			Date of Receipt
Mailing Address 251 East Huron Stre	eet		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Chicago	State IL	Zip Code 60611-2908	Transaction ID: 18756902
FEC ID number of contributing federal political committee.	C	00011-2900	Amount of Each Receipt this Period 150.00
Name of Employer Northwestern Memorial Hos- pital	- ' '	sident, Accounting	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 400.00]
SUBTOTAL of Receipts This Page (optional	\		600.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 171 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Si or for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any persoress of any political committee to	on for the purpose of soliciting contributions oscilicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
∠ A.	Full Name (Last, First, Middle Initial) Ms Carolyn Bengston			Date of Receipt
	Mailing Address 2400 North Rockton Av	venue		M M / D D / Y Y Y Y Y Y 1 1 1 1 9 2 0 1 0
	City	State	Zip Code	Transaction ID: 18756903
	Rockford	IL	61103-3655	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Rockford Memorial Hospital	Occupation Administr		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	800.00	
- В.	Full Name (Last, First, Middle Initial) Mr. Jeffrey Brickman	<u> </u>		Date of Receipt
	Mailing Address 333 North Madison Str	reet		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 18756904
	<u>Joliet</u>	<u>IL</u>	60435-8200	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		600.00
	Name of Employer Provena Saint Joseph Medi- cal Center	Occupation President	and Chief Executive Office	 r
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		1100.00	
- C.	Full Name (Last, First, Middle Initial) Ms. Helen M. Brooks			Date of Receipt
	Mailing Address 2400 North Rockton Av	venue		M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
	City	State	Zip Code	Transaction ID: 18756905
	Rockford	IL	61103-3655	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer Rockford Memorial Hospital	Occupation Corporate	e Director, Communications	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		400.00	
	SUPTOTAL of Descripts This Description - 1)	1		1050.00
}	SUBTOTAL of Receipts This Page (optional)		<u> </u>	
	TOTAL This Period (last page this line number of	only)		

	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person ne name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. William R. Dilts Mailing Address 11873 Warblers Way City Roscoe	State Zip Code IL 61073-7541	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Rockford Memorial Hospital Receipt For: Primary General Other (specify) ▼	Occupation Vice President, Strategic Plng/Relatio Aggregate Year-to-Date 400.00	150.00
Full Name (Last, First, Middle Initial) Ms. Kathleen Dunn Mailing Address 700 South Second St	treet State Zip Code	Date of Receipt M M
Springfield FEC ID number of contributing federal political committee. Name of Employer	IL 62704-2516 C Occupation	Transaction ID: 18756907 Amount of Each Receipt this Period 600.00
Illinois Hospítal Association Receipt For: Primary General Other (specify) ▼	Vice President Aggregate Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) Mr. Michael Easley Mailing Address 385 Millennium Drive	,	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Crystal Lake FEC ID number of contributing	State Zip Code IL 60012-3761 C	Transaction ID: 18756908 Amount of Each Receipt this Period 600.00
Rame of Employer Centegra Health System	Occupation President & CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
SUBTOTAL of Receipts This Page (optional)	>	1350.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 173 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any person name and address of any political committee to s	for the purpose of soliciting contributions olicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Anna N. Evans, JD		Date of Receipt
Mailing Address 701 North Fisrt Street City	State Zip Code	1 1 1 9 2 0 1 0 Transaction ID: 18756909
Springfield	IL 62704	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer Memorial Medical Center	Occupation General Counsel and Vice President Ir	- nt
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) Ms. Elizabeth Garrow		Date of Receipt
Mailing Address 6419 South Garfield A		11 1 9 2010
City	State Zip Code	Transaction ID: 18756910
Burr Ridge	IL 60527-5237	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer Provena Saint Joseph Medi- cal Center	Occupation Foundation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) Mr Robert W Kay		Date of Receipt
Mailing Address 701 North First Street		11 19 2010
City	State Zip Code	Transaction ID: 18756911
Springfield	IL 62781-0001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer Memorial Medical Center	Occupation Senior Vice President and Chief Finance	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
SUBTOTAL of Receipts This Page (optional)	······	450.00
TOTAL This Period (last page this line number	<u> </u>	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	(X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 174 / 261 (check only one) X
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American Hospital Association PA	ng the name and addre	ot be sold or used by any persons of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Ms. Terri L. Allen Mailing Address 1151 East Warrer	nville Road		Date of Receipt
City Naperville FEC ID number of contributing	State IL	Zip Code 60563-9339	Transaction ID: 18756995 Amount of Each Receipt this Period 1000.00
federal political committee. Name of Employer Illinois Hospital Association Receipt For: Primary General Other (specify) ▼	Occupation Chief Finar	nicial Officer ear-to-Date ▼ 1187.50	
Full Name (Last, First, Middle Initial) Mr. John Rhoades Mailing Address 1141 Midwest Lar	ne		Date of Receipt M M D D Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 18756997
Wheaton FEC ID number of contributing federal political committee.	C	60189-7382	Amount of Each Receipt this Period 150.00
Name of Employer Rockford Memorial Hospital Receipt For: Primary General		ating Officer ear-to-Date ▼	
Other (specify)	0 0 0	400.00	
Full Name (Last, First, Middle Initial) Mr. Kevin Ruggles			Date of Receipt
Mailing Address 2400 North Rockto	on Avenue		11 1 19 2010
City Rockford	State IL	Zip Code 61103-3655	Transaction ID: 18756999 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		300.00
Name of Employer Rockford Memorial Hospital	Occupation Chief Phys	cian Executive	
Receipt For: Primary General Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 1300.00	
SUBTOTAL of Receipts This Page (option	nal)		1450.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS Any information copied from such Reports and	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 175 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 17 for the purpose of soliciting contributions
or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	the name and address of any political committee to s	olicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Michael Baiardo		Date of Receipt
Mailing Address 1151 East Warrenvi	le Road	11 19 2010
City	State Zip Code	Transaction ID: 18757000
<u>Naperville</u>	IL 60563-9339	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Illinois Hospital Associa- tion	Occupation Assistant Vice President	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 343.78	
Full Name (Last, First, Middle Initial) Mr. Henry Seybold, Jr. Mailing Address FOO South Summit 6	Phroat	Date of Receipt
Mailing Address 529 South Summit S	Street	1 1 1 9 2 0 1 0
City	State Zip Code	Transaction ID: 18757001
Barrington	IL 60010-4413	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Rockford Memorial Hospital	Occupation CFO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	
Full Name (Last, First, Middle Initial) Mr. Jim H Skogsbergh		Date of Receipt
Mailing Address 2025 Windsor Drive		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18757002
Oak Brook	IL 60523-1586	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	600.00
Name of Employer Advocate Health Care	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1600.00	
SUBTOTAL of Receipts This Page (optional)	1150.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 176 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 11
A	ny information copied from such Reports and S for commercial purposes, other than using the	statements may not be sold or used by any persor name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Mr. B. Bradford Billings		Date of Receipt
	Mailing Address 2829 Cheswick Rd.	Chate 7'm Code	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Quincy	State Zip Code IL 62301-6380	Transaction ID: 18757003
	FEC ID number of contributing federal political committee.	C 02301-0300	Amount of Each Receipt this Period 600.00
	Name of Employer Blessing Hospital	Occupation President and Chief Executive Officer	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1100.00	
	Full Name (Last, First, Middle Initial) Mr. Paul F. Hills		Date of Receipt
	Mailing Address 18 Heron Lane		11 19 / 2010
	City	State Zip Code	Transaction ID: 18757004
	Barrington	IL 60010-5142	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	150.00
	Name of Employer Centegra Health System	Occupation Trustee	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 650.00	
_	Full Name (Last, First, Middle Initial) Ms. Barbara Johnson		Date of Receipt
	Mailing Address 385 Millennium Drive		11 19 / 9 2010
	City	State Zip Code	Transaction ID: 18757005
	Crystal Lake	IL 60012-3761	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	150.00
	Name of Employer Centegra Hospital - McHen- ry	Occupation Senior Vice President of Human Reso	purc
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼	400.00	
Г			900.00

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 177 / 261 (check only one) X 11a
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Mark Deaton Mailing Address 740 North Hayes City Oak Park FEC ID number of contributing federal political committee. Name of Employer Illinois Hospital Association Receipt For:	State Zip Code IL 60302-1706 C Occupation Sr. VP, General Counsel Aggregate Year-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Nancy DeMarco	1281.25	Date of Receipt
Mailing Address 1151 East Warrenville City	State Zip Code	1 1 1 9 2 0 1 0 Transaction ID: 18757035
<u>Naperville</u>	IL 60563-9339	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Illinois Hospital Associa- tion	Occupation Director of Development	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1281.25]
Full Name (Last, First, Middle Initial) Ms. Lois DeTraglia		Date of Receipt
Mailing Address 1151 E. Warrenville R		11 19 2010
City Naperville	State Zip Code IL 60563-9339	Transaction ID: 18757036 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Illinois Hospital Associa- tion	Occupation Vice President, Human Resources	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 343.78	
	•	2250.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAG	nd Statements may not be sold or used by any person the name and address of any political committee to s	for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Barbara Filliung Mailing Address 1013 59th Street		Date of Receipt
City	State Zip Code	1 1 1 9 2 0 1 0 Transaction ID: 18757037
Lisle FEC ID number of contributing federal political committee.	IL 60532-3122	Amount of Each Receipt this Period 200.00
Name of Employer Illinois Hospital Association Receipt For: ☐ Primary ☐ General Other (specify) ▼	Occupation Senior Director, Government Relations Aggregate Year-to-Date ▼ 293.78	<u>-</u> <u>3</u>
Full Name (Last, First, Middle Initial) Ms. Tamara Lynn Gamrat Mailing Address 1911 Hamilton Stre	pet	Date of Receipt
City Murphysboro FEC ID number of contributing federal political committee.	State Zip Code IL 62966-1519 C	Transaction ID: 18757038 Amount of Each Receipt this Period 200.00
Name of Employer Illinois Hospital Association Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Senior Risk Management Coordination Aggregate Year-to-Date ▼ 270.33	<u>1</u>
Full Name (Last, First, Middle Initial) Ms Vicki Garretson		Date of Receipt
Mailing Address 1151 East Warrenv	rille Road	11 19 7 2010
City <u>Naperville</u>	State Zip Code IL 60563-9339	Transaction ID: 18757042 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Illinois Hospital Associa- tion	Occupation Director, Malpractice	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 312.50	
SUBTOTAL of Receipts This Page (optional	i)	650.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 179 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 1
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may not be sold or used by any persename and address of any political committee t	son for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Ann C. Guild		Date of Receipt
	Mailing Address 1151 E. Warrenville R PO Box 3015		11 19 2010
	City Naperville	State Zip Code IL 60563-9339	Transaction ID: 18757044
	FEC ID number of contributing federal political committee.	C 60363-9339	Amount of Each Receipt this Period 500.00
	Name of Employer Illinois Hospital Associa- tion	Occupation Vice President	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 687.51	
	Full Name (Last, First, Middle Initial) Mr. Ed Holzhauer		Date of Receipt
	Mailing Address 1755 Maple Lane		1 1 1 9 2 0 1 0
	City	State Zip Code	Transaction ID: 18757048
	Wheaton	IL 60187-3317	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer Illinois Hospital Associa- tion	Occupation Senior Vice President	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1281.25	
	Full Name (Last, First, Middle Initial) Ms. Teresa Hursey		Date of Receipt
	Mailing Address 1151 East Warrenville	Road	11 1 9 2010
	City	State Zip Code	Transaction ID: 18757049
	Naperville	IL 60563-9339	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer Illinois Hospital Associa- tion	Occupation Vice President, Finance	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1281.25	
			2500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 180 / 261 (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	and Statements may	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PA	<u> </u>		
Full Name (Last, First, Middle Initial) Ms. Susan Kaufman			Date of Receipt
Mailing Address 1151 E. Warranvill	le Rd.		1 1 1 9 2 0 1 0
City	State IL	Zip Code	Transaction ID: 18757052
Naperville FEC ID number of contributing federal political committee.	C	60563-9339	Amount of Each Receipt this Period 650.00
Name of Employer Illinois Hospital Associa- tion	Occupation Chief of S		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 994.50	
Full Name (Last, First, Middle Initial) Ms. Nichole Magalis			Date of Receipt
Mailing Address 1151 East Warren	Mailing Address 1151 East Warrenville Road		
City	State	Zip Code	Transaction ID: 18757062
Naperville FEC ID number of contributing federal political committee.	C	60563-9339	Amount of Each Receipt this Period 250.00
Name of Employer Illinois Hospital Associa-	Occupation Senior D	n irector, Government Relatior	ns.
Receipt For: Primary General Other (specify)		Year-to-Date ▼ 333.36	
Full Name (Last, First, Middle Initial) Ms. Patricia Merryweather-Arges			Date of Receipt
Mailing Address 1151 E. Warrenvill PO Box 3015	le Road		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Naperville	State IL	Zip Code 60563-9339	Transaction ID: 18757070 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Illinois Hospital Associa- tion	Occupation Vice Pres	sident	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1281.25]
SUBTOTAL of Receipts This Page (option	<u> </u>	_	1900.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 181 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Α.	Full Name (Last, First, Middle Initial) Ms Dianne O'Donnell		Date of Receipt
	Mailing Address 1151 East Warrenville		11 19 2010
	City Naperville	State Zip Code IL 60563-9339	Transaction ID: 18757072
	FEC ID number of contributing federal political committee.	C 60003-9539	Amount of Each Receipt this Period 250.00
	Name of Employer Illinois Hospital Associa- tion	Occupation Director, Sales & Marketing	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 272.50	
- В.	Full Name (Last, First, Middle Initial) Mr. Howard A. Peters, III		Date of Receipt
	Mailing Address 4109 Southwoods Roa	11 19 2010	
	City	State Zip Code	Transaction ID: 18757080
	Springfield FEC ID number of contributing federal political committee.	IL 62707-6070	Amount of Each Receipt this Period 1000.00
	Name of Employer Illinois Hospital Associa- tion	Occupation Executive Vice President	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1281.25	
- C.	Full Name (Last, First, Middle Initial) Dr. Ted Lorenc, MD		Date of Receipt
	Mailing Address 6710 Concord Trail	1 1 1 9 2 0 1 0	
	City	State Zip Code IL 60012-3147	Transaction ID: 18757082
	Crystal Lake FEC ID number of contributing federal political committee.	IL 60012-3147	Amount of Each Receipt this Period 150.00
	Name of Employer Centegra Health System	Occupation Chief Medical Officer	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 400.00	
	SUBTOTAL of Receipts This Page (optional)	.	1400.00
	TOTAL This Period (last page this line number	·	

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 182 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 1
	r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	American Hospital Association PAC		_
	Full Name (Last, First, Middle Initial) Ms. Angela McAuley		Date of Receipt
	Mailing Address 1301 Winston Circle		11 1 1 9 2 0 1 0
	City Woodstock	State Zip Code IL 60098-3678	Transaction ID: 18757083 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	150.00
	Name of Employer Centegra Hospital - Woods- tock	Occupation Director, Risk	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	400.00	
_	Full Name (Last, First, Middle Initial) Mr. Doug L. Rahn		Date of Receipt
	Mailing Address 701 North First Street		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 18757084
	Springfield	IL 62781-0001	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	600.00
	Name of Employer Memorial Health System	Occupation Senior Vice President and Chief Operation	at
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1100.00	
_	Full Name (Last, First, Middle Initial) Mr. Robert Rosenberger		Date of Receipt
	Mailing Address 32 Rock River Court		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 18757085
	Naperville	IL 60565-6347	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	150.00
	Name of Employer Centegra Health System	Occupation Chief Financial Officer	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify) ▼	400.00	
	CURTOTAL of Descripts This Dame (antique)	>	900.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 183 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may name and add	not be sold or used by any person ress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
\ A .	Full Name (Last, First, Middle Initial) Mr. Jason Sciarro Mailing Address 14255 Castlebar Trail			Date of Receipt
	City Woodstock	State IL	Zip Code 60098-8881	Transaction ID: 18757086 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Centegra Health System Receipt For: Primary General Other (specify) ▼		erating Officer Year-to-Date ▼ 800.00	
3.	Full Name (Last, First, Middle Initial) Ms. Kathleen C Yosko Mailing Address P O Box 795			Date of Receipt
	City	State	Zip Code	Transaction ID: 18757087
	Wheaton FEC ID number of contributing federal political committee.	C	60189-0795	Amount of Each Receipt this Period
	Name of Employer Marianjoy Rehabilitation Hospital Receipt For:		and Chief Executive Officer Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	400.00	
	Full Name (Last, First, Middle Initial) Mr. Daniel A. Parod			Date of Receipt
	Mailing Address 2400 North Rockton Avenue			11 19 2010
	City Rockford	State IL	Zip Code 61103-3655	Transaction ID: 18757088 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1 1 1 1 1	600.00
	Name of Employer Rockford Memorial Hospital	Occupation Senior Vid	ce President Administrative	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1100.00	
	SUBTOTAL of Receipts This Page (optional)		······	1050.00
ŀ	TOTAL This Period (last page this line number of			

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 184 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may name and addr	not be sold or used by any perso ess of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Mr. Phillip M Kambic Mailing Address 350 North Wall Street City	State	Zip Code	Date of Receipt 1 1 1 9 2 0 1 0 Transaction ID: 18757089
	<u>Kankakee</u>	IL	60901-2901	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer Riverside Medical Center Receipt For: Primary Other (specify)		cutive Officer Year-to-Date ▼	
- В.	Full Name (Last, First, Middle Initial) Mr. Evert J. Kuiper Mailing Address 4001 Stoneledge Court		0 0 0 0 0 0 0	Date of Receipt 1 1 1 9 2 0 1 0
	City	State	Zip Code	1 1 1 9 2 0 1 0 Transaction ID: 18757090
	Godfrey	IL	62035-1160	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	0.000 1100	150.00
	Name of Employer Saint Anthony's Health System Receipt For: Primary Other (specify)		and Chief Executive Officer Year-to-Date ▼ 650.00	
_	Full Name (Last, First, Middle Initial)	0 0	0 0 0 0 0 0 0	1
) .	Dr. James C Leonard, , M.D. Mailing Address 611 West Park Street			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 18757091
	<u>Urbana</u>	IL	61801-2500	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Carle Foundation Hospital	-	and Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 800.00	
	SUBTOTAL of Receipts This Page (optional)			600.00
	TOTAL This Period (last page this line number of	only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 185 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may name and ado	not be sold or used by any perso fress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
∠ \ .	Full Name (Last, First, Middle Initial) Ms. Jo Ann Spoor Mailing Address 700 South Second Stre	eet		Date of Receipt
	City Springfield	State IL	Zip Code 62704-2516	Transaction ID: 18757099 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Illinois Hospital Association Receipt For: Primary General Other (specify) ▼	Occupation Director, Aggregate		
3.	Full Name (Last, First, Middle Initial) Ms. Laraine Williams Mailing Address 1151 E. Warrenville Ro	oad		Date of Receipt 1 1 1 9 2 0 1 0
	City	State	Zip Code	Transaction ID: 18757104
	Naperville FEC ID number of contributing federal political committee.	C	60563-9339	Amount of Each Receipt this Period 1000.00
	Name of Employer Illinois Hospital Associa- tion	Occupation Vice Pres		
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1281.25	
	Full Name (Last, First, Middle Initial) Mr. Gary E Kaatz			Date of Receipt
	Mailing Address 2400 North Rockton Avenue			11 19 2010
	City Rockford	State IL	Zip Code 61103-3692	Transaction ID: 18757111 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1 1 1 1 1 1 1	600.00
	Name of Employer Rockford Memorial Hospital	Occupation President	n : and Chief Executive Office	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1100.00	
	SUBTOTAL of Receipts This Page (optional)	I		1850.00
	TOTAL This Period (last page this line number of	only)	•	

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 186 / 261 (check only one) X
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. John Jurica, , M.D. Mailing Address 350 North Wall Street City	State Zip Code	Date of Receipt 1 1 9 2 0 1 0 Transaction ID: 18757112
Kankakee FEC ID number of contributing federal political committee. Name of Employer	C Occupation	Amount of Each Receipt this Period 150.00
Name of Employer Riverside Medical Center Receipt For: Primary General Other (specify) ▼	Vice President Medical Affairs Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) Dr. Anil Godbole, MD., S.C. Mailing Address 1893 Mission Hills Lar	ne	Date of Receipt 1 1 1 9 2 0 1 0
City	State Zip Code	Transaction ID: 18757114
Northbrook FEC ID number of contributing federal political committee.	IL 60062-5760	Amount of Each Receipt this Period 150.00
Name of Employer Advocate Illinois Masonic Medical Cent Receipt For: Primary General Other (specify) ▼	Occupation Chairman, Dept. of Psychiatry Aggregate Year-to-Date 400.00]
Full Name (Last, First, Middle Initial) Mr. Dolan Dalpoas		Date of Receipt
Mailing Address 130 Half Moon		11
City Lincoln	State Zip Code II 62656-1327	Transaction ID: 18757115
FEC ID number of contributing federal political committee.	IL 62656-1327	Amount of Each Receipt this Period
Name of Employer Abraham Lincoln Memorial Hospital Receipt For: Primary General Other (specify) ▼	Occupation President & Chief Executive Officer Aggregate Year-to-Date 462.50	
SUBTOTAL of Receipts This Page (optional)	,	450.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 187 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 17
0	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Α.	Full Name (Last, First, Middle Initial) Mr. Aaron T. Shepley		Date of Receipt
	Mailing Address 385 Millennium Drive		11 19 7 2010
	City Crystal Lake	State Zip Code IL 60012-3740	Transaction ID: 18757116 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	150.00
	Name of Employer Centegra Hospital - McHen- ry	Occupation Senior Vice President, Chief Quality	 o
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
В.	Full Name (Last, First, Middle Initial) Mr. Danny Chun	L	Date of Receipt
	Mailing Address 303 North Oak Park A	1 1 1 9 2 0 1 0	
	City	State Zip Code	Transaction ID: 18757117
	Oak Park FEC ID number of contributing federal political committee.	IL 60302-2189	Amount of Each Receipt this Period 600.00
	Name of Employer Illinois Hospital Associa- tion	Occupation Vice President, Communications	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1350.00]
_ S.	Full Name (Last, First, Middle Initial) Ms. Joanne Fenton, , FACHE		Date of Receipt
	Mailing Address 111 Spring Street		M M / D D / Y Y Y Y Y 1 Y 1 1 9 2 0 1 0
	City	State Zip Code	Transaction ID: 18757118
	Streator FEC ID number of contributing federal political committee.	IL 61364-3332	Amount of Each Receipt this Period 150.00
	Name of Employer St. Mary's Hospital	Occupation President and Chief Executive Office	 r
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Γ,	SUBTOTAL of Receipts This Page (optional)	_	900.00
	TOTAL This Period (last page this line number	•	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 188 / 261 (check only one) X
A	ny information copied from such Reports and for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Maureen A Kahn		Date of Receipt
	Mailing Address P O Box 7005		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 18757119
	Quincy	IL 62305-7005	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	150.00
	Name of Employer Blessing Hospital	Occupation President and Chief Executive Office	r
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	400.00	
	Full Name (Last, First, Middle Initial) Mr. Keith Allen Page		Date of Receipt
	Mailing Address 6800 State Route 16	2	11 / 19 / Y Y Y Y Y
	City	State Zip Code	Transaction ID: 18757120
	Maryville	IL 62062-8500	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	300.00
	Name of Employer Anderson Hospital	Occupation President and Chief Executive Office	r
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	
_	Full Name (Last, First, Middle Initial) Mr. Michael Russo		Date of Receipt
	Mailing Address 1706 Seminole Lane		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 18757123
	Godfrey	IL 62035-1500	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	150.00
	Name of Employer Saint Anthony's Health Sy- stem	Occupation Chief Information Officer	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	400.00	
			600.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 189 / 261 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any persor the name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Harry Wolin Mailing Address P O Box 530 City Havana FEC ID number of contributing federal political committee. Name of Employer Mason District Hospital	State Zip Code IL 62644-0530 C Occupation Administrator and Chief Executive Offi	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	
Full Name (Last, First, Middle Initial) Mr. Daniel J Woods Mailing Address 503 North Maple St	reet	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City Effingham FEC ID number of contributing federal political committee.	State Zip Code IL 62401-2006 C	Amount of Each Receipt this Period 300.00
Name of Employer St. Anthony's Memorial Hospital Receipt For: Primary General Other (specify) ▼	Occupation President and Chief Executive Officer Aggregate Year-to-Date 800.00	
Full Name (Last, First, Middle Initial) Mr. Michael Englehart Mailing Address 12840 Sycamore		Date of Receipt 1 1 1 9 2 0 1 0
City Palos Heights FEC ID number of contributing	State Zip Code IL 60463-1939 C	Transaction ID: 18757126 Amount of Each Receipt this Period 600.00
Name of Employer Advocate South Suburban Hospital	Occupation President	_
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	
SUBTOTAL of Receipts This Page (optional	l)	1200.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 190 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any perso he name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Jonathan R. Bruss Mailing Address 30 W 061 Kensingto	n Drive	Date of Receipt
City Warrenville	State Zip Code IL 60555	Transaction ID: 18757127 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer Advocate Good Samaritan Hospital Receipt For: ☐ Primary ☐ General Other (specify) ▼	Occupation Chief Executive Officer Aggregate Year-to-Date 400.00	
Full Name (Last, First, Middle Initial) Mr. Charles Derus Mailing Address 2025 Windsor Drive		Date of Receipt
City	State Zip Code	Transaction ID: 18757128
Oak Brook	IL 60523-1586	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer Advocate Health Care	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) Mr. Richard S Kowalski		Date of Receipt
Mailing Address 3333 North Seminary	y Street	1 1 1 9 2 0 1 0
City	State Zip Code	Transaction ID: 18757129
Galesburg FEC ID number of contributing federal political committee.	IL 61401-1299	Amount of Each Receipt this Period 300.00
Name of Employer OSF St. Mary Medical Cent- er	Occupation Administrator and Chief Executive Off	- ii_
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 800.00	
SUBTOTAL of Receipts This Page (optional)		600.00
TOTAL This Period (last page this line numb	er only)	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separat for each cate Detailed Sur		FOR LINE NUMBER: PAGE 191 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16
Any or f	y information copied from such Reports and S for commercial purposes, other than using the	tatements may not be sold or name and address of any pol	used by any person itical committee to s	for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
	Full Name (Last, First, Middle Initial) Ms. Karen A Lambert			Date of Receipt
	Mailing Address 450 West Highway 22			11 / 19 / 2010
	City	State Zip Code IL 60010-19	10	Transaction ID: 18757133
	Barrington FEC ID number of contributing federal political committee.	IL 60010-19 ⁻	19	Amount of Each Receipt this Period 300.00
	Name of Employer Advocate Good Shepherd Ho- spital	Occupation President		_
	Receipt For:	Aggregate Year-to-Date	▼	1
	Primary General Other (specify) ▼		800.00	
	Full Name (Last, First, Middle Initial) Mr. Dominic Nakis			Date of Receipt
	Mailing Address 2268 River Woods Drive			11 19 2010
	City	State Zip Code		Transaction ID: 18757134
	Naperville	IL 60565-635	51	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Advocate Health Care	Occupation Vice President, Finance	ce	
	Receipt For:	Aggregate Year-to-Date	▼	
	Primary General Other (specify) ▼		800.00	
	Full Name (Last, First, Middle Initial) Mr. Scott Powder			Date of Receipt
	Mailing Address 1775 Dempster			M M / D D / Y Y Y Y Y Y 1 1 1 1 9 2 0 1 0
	City	State Zip Code		Transaction ID: 18757135
	Park Ridge	IL 60068-114	43	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Advocate Lutheran General Hospital	Occupation SVP, Strategic Plannin		
	Receipt For: Primary General	Aggregate Year-to-Date	▼	
	Other (specify)		800.00	
	JBTOTAL of Receipts This Page (optional)	<u> </u>		900.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 192 / 261 (check only one) X 11a	
Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any personal statements and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.	
Full Name (Last, First, Middle Initial) Dr. Lee Sacks Mailing Address 2025 Windsor Drive City	State Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Oak Brook FEC ID number of contributing federal political committee.	IL 60523-1586	Amount of Each Receipt this Period 600.00	
Name of Employer Advocate Health Care Receipt For: Primary General Other (specify) ▼	Occupation Executive Vice President and Chief Maggregate Year-to-Date 1100.00		
Full Name (Last, First, Middle Initial) Mr. John Bomher Mailing Address 1151 E. Warrenville F	load	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City	State Zip Code	Transaction ID: 18757137	
Naperville FEC ID number of contributing federal political committee.	IL 60563-9339	Amount of Each Receipt this Period 600.00	
Name of Employer Illinois Hospital Associa- tion Receipt For:	Occupation Senior VP, Health Policy		
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00]	
Full Name (Last, First, Middle Initial) Mr. James Dan		Date of Receipt	
Mailing Address 511 Forest Mews	Mailing Address 511 Forest Mews		
City Oak Brook	State Zip Code IL 60523-2643	Transaction ID: 18757143	
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 300.00	
Name of Employer Advocate Health Care	Occupation President	7	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00		
	•	1500.00	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 193 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the	statements may not be sold or used by any person name and address of any political committee to so	for the purpose of soliciting contributions olicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Scott Dimmick		Date of Receipt
Mailing Address 1324 North Sheridan F		1 1 1 9 2 0 1 0
City <u>Waukegan</u>	State Zip Code IL 60085-2161	Transaction ID: 18757144 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer Vista Medical Center East	Occupation Vice President of Human Resources	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) . Ms Bridgett Gibbons		Date of Receipt
Mailing Address 2132 West Warner		11 1 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18757145
Chicago	IL 60618-3032	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	600.00
Name of Employer Advocate South Suburban Hospital	Occupation Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) Mr. James M. Hohner	I.	Date of Receipt
Mailing Address 2159 W. Agatite		11 19 2010
City	State Zip Code	Transaction ID: 18757146
Chicago	IL 60625-1705	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer Advocate Health Care	Occupation Director, Advocate Health Care Foundation	it
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
SUBTOTAL of Receipts This Page (optional)		900.00
TOTAL This Period (last page this line number	<u> </u>	

Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Roger S Hunt Mailing Address P O Box 2850	Statements may not be sold or used by any person e name and address of any political committee to s	for the purpose of soliciting contributions solicit contributions from such committee.
Mr. Roger S Hunt		Date of Receipt
City Bloomington FEC ID number of contributing federal political committee. Name of Employer Advocate BroMenn Regional Medical Cent	State Zip Code IL 61702-2850 C Occupation Chief Executive Officer	Transaction ID: 18757147 Amount of Each Receipt this Period 150.00
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) Mr. Kenneth W Lukhard Mailing Address 4440 West 95th Stree City Oak Lawn	State Zip Code IL 60453-2600	Date of Receipt M M M J D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Advocate Christ Medical Center Receipt For: Primary General Other (specify)	Occupation President Aggregate Year-to-Date 800.00	300.00
Full Name (Last, First, Middle Initial) Ms. Barbara J Martin, , R.N. Mailing Address 1324 North Sheridan	Road	Date of Receipt 1 1 1 9 2 0 1 0
City Waukegan FEC ID number of contributing	State Zip Code IL 60085-2161	Transaction ID: 18757149 Amount of Each Receipt this Period
federal political committee. Name of Employer Vista Medical Center East	Occupation President and Chief Executive Officer	600.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	-
SUBTOTAL of Receipts This Page (optional) .	>	1050.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 195 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
۷.	Full Name (Last, First, Middle Initial) Mr William P Santulli			Date of Receipt
	Mailing Address 2025 Windsor Drive			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 18757150
	Oak Brook	<u>IL</u>	60523-1586	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Advocate Health Care	Occupation Executive	n e Vice President and Chief C	Dpe
	Receipt For:	Aggregate	Year-to-Date ▼	<u> </u>
	Primary General Other (specify) ▼	0 0	800.00]
- 3.	Full Name (Last, First, Middle Initial) Mr. David L. Schreiner			Date of Receipt
	Mailing Address 1435 Tilton Park Drive	!		11 1 9 7 9 10
	City	State	Zip Code	Transaction ID: 18757151
	<u>Dixon</u>	<u> </u>	61021-1437	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Katherine Shaw Bethea Hos- pital	Occupation Vice Pres		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		800.00	
	Full Name (Last, First, Middle Initial) Ms. Katie Vaughan			Date of Receipt
	Mailing Address 506A East Howell Aver	nue		11 22 7 2010
	City	State	Zip Code	Transaction ID: PR1034595124482
	Alexandria	VA	22301-1216	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		60.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Associate		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		460.00	P/R Deduction (\$20.00 Bi- Weekly)
	SURTOTAL of Receipts This Base (antional)	<u>I</u>		660.00
-	SUBTOTAL of Receipts This Page (optional)			
	TOTAL This Period (last page this line number	only))	

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 196 / 261 (check only one) X 11a
A 0	ny information copied from such Reports and St r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	American Hospital Association PAC			_
۱.	Full Name (Last, First, Middle Initial) Ms. Melinda Reid Hatton			Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700		7'- O-d-	111 22 2010
	City Washington	State DC	Zip Code 20004-2818	Transaction ID: PR1045726224482 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		120.00
	Name of Employer American Hospital Associa- tion-Washingt		ce President & General Cou	nse
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 920.00	P/R Deduction (\$40.00 Bi- Weekly)
. –	Full Name (Last, First, Middle Initial) Mr. David Schulke			Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	V		11 22 7 2010
	City	State DC	Zip Code	Transaction ID: PR1057462124482
	Washington FEC ID number of contributing federal political committee.	C	20004-2801	Amount of Each Receipt this Period 176.46
	Name of Employer American Hospital Associa- tion-Washingt	Occupation VP Resea	ո arch Programs	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 882.30	P/R Deduction (\$58.82 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Sarah Berk			Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	V		11 22 7 2010
	City Washington	State DC	Zip Code 20004-2818	Transaction ID: PR1082532724482
	FEC ID number of contributing federal political committee.	C	20004-2010	Amount of Each Receipt this Period 42.00
	Name of Employer American Hospital Associa- tion-Washingt		ssociate Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.00	P/R Deduction (\$14.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)			338.46

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 197 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16
C	ny information copied from such Reports and St r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may not be sold or used by any persor name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Barbara Jellen		Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700		11 22 7 2010
	City	State Zip Code	Transaction ID: PR1113464224482
	Washington	DC 20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	42.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Section Director, Constituency Section	1
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	322.00	P/R Deduction (\$14.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Lisa Allen		Date of Receipt
	Mailing Address One North Franklin		11 22 2010
	City	State Zip Code	Transaction ID: PR1118928224482
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	61.74
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Sr. Vice President, Chief Human Reso	our .
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	308.70	P/R Deduction (\$20.58 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Mary Meadows		Date of Receipt
	Mailing Address One North Franklin		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR1260472924482
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	42.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Director of Professional Practice, AON	N N
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 322.00	P/R Deduction (\$14.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)	·····	145.74

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 198 / 261 (check only one) X 11a
\ \ \	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Elizabeth Baskett		Date of Receipt
	Mailing Address 325 Seventh Street, NV	V	11 22 7 2010
	City	State Zip Code	Transaction ID: PR1332167424482
	Washington	DC 20004-2802	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	47.73
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Associate Director, Policy	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	318.20	P/R Deduction (\$15.91 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. James Wadzinski		Date of Receipt
	Mailing Address One North Franklin		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR1347703424482
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	60.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President Account Services	7
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	460.00	P/R Deduction (\$20.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Jack A. Mackay		Date of Receipt
-	Mailing Address One North Franklin		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR1347703624482
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	60.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President & CIO	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	P/R Deduction (\$20.00 Bi- Weekly)
Γ	SUBTOTAL of Receipts This Page (optional)		167.73

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 199 / 261 (check only one) X 11a
4	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
. K	Full Name (Last, First, Middle Initial) Ms. Susan Gergely		Date of Receipt
	Mailing Address One North Franklin		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Chicago	State Zip Code IL 60606-3436	Transaction ID: PR1347791024482
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 42.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For: Primary General	Occupation Director of Operations, AONE Aggregate Year-to-Date	
	Other (specify)	322.00	P/R Deduction (\$14.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. John Slotman	-	Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	W	11
	City	State Zip Code	Transaction ID: PR1384065324482
	Washington	DC 20004-2802	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	60.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Associate Director, Federal Relations	5
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	460.00	P/R Deduction (\$20.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Sharon Allen		Date of Receipt
	Mailing Address 155 North Wacker Dri	ve	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR1474886224482
	Chicago	IL 60606-1709	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	52.50
	Name of Employer American Hospital Associa- tion-Chicago Receipt For:	Occupation Membership and Marketing Manager	ASHHR
	Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	P/R Deduction (\$17.50 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional) .	,	154.50

SCHEDULE A (FEC	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 200 / 261 (check only one) X
Any information copied from sor for commercial purposes, of NAME OF COMMITTEE (American Hospital Ass	ther than using the name and (In Full)	s may not be sold or used by any persor d address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Mic Mr. Mark Colucci	ldle Initial)		Date of Receipt
Mailing Address 1061 N City	N Penny Ln Stat	e Zip Code	1 1 2 2 2 2 0 1 0 Transaction ID: PR1475133724482
Palatine FEC ID number of contributed federal political committee.		60067-1821	Amount of Each Receipt this Period 60.00
Name of Employer American Hospital Association-Chicago Receipt For: Primary Other (specify) ▼	INALIC	pation onal Director Sponsorship and Un egate Year-to-Date ▼ 460.00	de P/R Deduction (\$20.00 Bi- Weekly)
Full Name (Last, First, Mic Ms. Stephanie H. Drake Mailing Address One N	,		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City	Stat	e Zip Code	Transaction ID: PR1492459924482
<u>Chicago</u>	<u> L</u>	60606-3436	Amount of Each Receipt this Period
FEC ID number of contribution federal political committee.	uting		60.00
Name of Employer American Hospital Association-Chicago Receipt For: Primary Other (specify)	ASSO	pation ciate Executive Director - ASHHF egate Year-to-Date ▼ 460.00	P/R Deduction (\$20.00 Bi-Weekly)
Full Name (Last, First, Mic Ms. Monica D Day	Idle Initial)		Date of Receipt
	Prince Place #205		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	Stat	•	Transaction ID: PR1516850624482
Largo FEC ID number of contributed federal political committee.		20774-1210	Amount of Each Receipt this Period 42.00
Name of Employer American Hospital Association-Washingt Receipt For:	Politi	pation cal Affairs Coordinator egate Year-to-Date ▼	
	eneral	322.00	P/R Deduction (\$14.00 Bi- Weekly)
SUBTOTAL of Receipts This	s Page (optional)		162.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 201 / 261 (check only one) X
A	ny information copied from such Reports and S for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
<u></u>	Full Name (Last, First, Middle Initial) Ms. Elisa Arespacochaga			Date of Receipt
	Mailing Address One North Franklin			1 1 2 2 2 2 0 1 0
	City Chicago	State IL	Zip Code 60606-3436	Transaction ID: PR1555656224482 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For:		n e Director, Constituency Sec	oti
	Primary General Other (specify) ▼	Aggregate	322.00	P/R Deduction (\$14.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. Clinton S. Manning			Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	W		11 22 2 2 2 2 2 1 0
	City	State	Zip Code	Transaction ID: PR1555656524482
	Washington	DC	20004-2802	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Asst. Dire	n ector Advocacy & Member (Commu
	Receipt For:	, '	e Year-to-Date ▼	
	Primary General Other (specify) ▼		322.00	P/R Deduction (\$14.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Kathy Poole	1		Date of Receipt
	Mailing Address One North Franklin			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1589439924482
	Chicago	IL	60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For:		n Governance Projects e Year-to-Date ▼	
	Primary General Other (specify) ▼	1.55.05410	322.00	P/R Deduction (\$14.00 Bi- Weekly)
\lceil	SUBTOTAL of Receipts This Page (optional)	l		126.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 202 / 261 (check only one) X
A	ny information copied from such Reports and S for commercial purposes, other than using the	Statements may not be sold or used by any perse name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Mr. Robert Kehoe		Date of Receipt
	Mailing Address One North Franklin		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR1625368324482
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.01
	Name of Employer American Hospital Associa-	Occupation Associate Publisher Vertical Magazin	205
	tion-Chicago Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	316.73	P/R Deduction (\$16.67 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Kelly Redmond		Date of Receipt
	Mailing Address 155 North Wacker Dri	ve	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR1625588824482
	Chicago	IL 60606-1709	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	42.00
	Name of Employer American Hospital Associa-	Occupation Director Operations	
	tion-Chicago Receipt For:	Aggregate Year-to-Date ▼	_
	Primary General Other (specify) •	322.00	P/R Deduction (\$14.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Stephen Hines	I	Date of Receipt
	Mailing Address 155 North Wacker Dri	ve	1 1 2 2 2 0 1 0
	City	State Zip Code	Transaction ID: PR1648726624482
	Chicago	IL 60606-1709	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.01
	Name of Employer American Hospital Associa- tion-Chicago	Occupation VP, Research HRET	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	D/D Doduction (\$16.67.0)
	Other (specify)	316.73	P/R Deduction (\$16.67 Bi- Weekly)
Γ	NUDTOTAL (D TI: D ()		142.02

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 203 / 261 (check only one) X
A	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may not be sold or used by any personante and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Lisa Grabert		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700		11 22 7 2010
	City <u>Washington</u>	State Zip Code DC 20004-2801	Transaction ID: PR1671258624482 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	136.35
	Name of Employer American Hospital Associa- tion-Washingt Receipt For: Primary General	Occupation Senior Associate Director, Policy Aggregate Year-to-Date ▼	P/R Deduction (\$45.45 Bi-
_	Other (specify)	909.00	Weekly)
	Full Name (Last, First, Middle Initial) Mr Robert P David Mailing Address One North Franklin		Date of Receipt M M D D Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR1677512424482
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	136.35
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Regional Executive	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 909.00	P/R Deduction (\$45.45 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Linda Fishman		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700		11 22 7 2010
	City Washington	State Zip Code DC 20004-2818	Transaction ID: PR327629124482 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	120.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Vice President, Public Policy	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 920.00	P/R Deduction (\$40.00 Bi- Weekly)
			392.70

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 204 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Debbie F. Weiner		Date of Receipt
Mailing Address 11004 Petersborough	Drive	11 22 7 2010
City	State Zip Code	Transaction ID: PR327745924482
Rockville	MD 20852-3249	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	120.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Director, Grassroots Advocacy	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	920.00	P/R Deduction (\$40.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Mr. Michael P. McCue		Date of Receipt
Mailing Address 122 N. Greenwood Ave	enue	M M / D D / Y Y Y Y Y Y 1 1 1 2 2 2 2 2 0 1 0
City	State Zip Code	Transaction ID: PR327771624482
Park Ridge	IL 60068-3227	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	60.00
Name of Employer American Hospital Associa- tion-Chicago	Occupation Associate Director	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	460.00	P/R Deduction (\$20.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Suzanne R. Sonik		Date of Receipt
Mailing Address One North Franklin		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: PR327777224482
Chicago	IL 60606-3436	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	42.00
Name of Employer American Hospital Associa- tion-Chicago	Occupation Director, Long-Term Care	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	322.00	P/R Deduction (\$14.00 Bi- Weekly)
CURTOTAL of Descripto This Descriptoral		222.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 205 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 11
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may not be sold or used by any person name and address of any political committee to s	for the purpose of soliciting contributions olicit contributions from such committee.
	American Hospital Association PAC		-
١.	Full Name (Last, First, Middle Initial) Ms. Debra J. Stock		Date of Receipt
	Mailing Address 1022 S. Harvey Avenue	State Zip Code	11 22 2010
	City Oak Park	IL 60304-2132	Transaction ID: PR327777824482 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	120.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President, Member Relations	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 920.00	P/R Deduction (\$40.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. Neil J. Jesuele		Date of Receipt
	Mailing Address 1003 Kimberly Place		11 22 2010
	City	State Zip Code	Transaction ID: PR327801724482
	Great Falls	VA 22066-1546	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	60.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Executive Vice President	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	P/R Deduction (\$20.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Pamela Austin Thompson, RN, MSN		Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	V	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR327812024482
	Washington	DC 20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	120.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Chief Executive Officer, AONE & Sr. Vi	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 920.00	P/R Deduction (\$40.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)		300.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 206 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 11
A	for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Joan H. Lewis		Date of Receipt
	Mailing Address 6034 North 22nd Stree		11 22 2010
	City Arlington	State Zip Code VA 22205-3408	Transaction ID: PR327831724482 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	60.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Regional Executive	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 460.00	P/R Deduction (\$20.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Robert J. Donovan	Date of Receipt	
	Mailing Address One North Franklin St	11 22 7 2010	
	City	State Zip Code	Transaction ID: PR327846224482
	Chicago	IL 60606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	60.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President, Meetings & Travel Ser	rv
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 460.00	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Ellen A. Pryga	Date of Receipt	
	Mailing Address 2401 Calvert Street, N Apt. 1008		11 22 2010
	City	State Zip Code	Transaction ID: PR327851924482
	Washington FEC ID number of contributing federal political committee.	DC 20008-2614	Amount of Each Receipt this Period 60.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Director, Policy Development	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 460.00	P/R Deduction (\$20.00 Bi- Weekly)
Γ,	SUBTOTAL of Receipts This Page (optional)		180.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 207/261 (check only one) X 11a
A	ny information copied from such Reports and S for commercial purposes, other than using the	tatements may	y not be sold or used by any perso	on for the purpose of soliciting contributions
<u> </u>	NAME OF COMMITTEE (In Full)	name and add	diess of any political committee to	Solicit Contributions from Such Committee.
	American Hospital Association PAC			
	Full Name (Last, First, Middle Initial) Mr. Mark Seklecki			Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	N		11 22 7 2010
	City Washington	State DC	Zip Code 20004-2818	Transaction ID: PR327858024482 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		120.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupatio Vice Pres	n sident, Political Affairs	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 920.00	P/R Deduction (\$40.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. John F. Barry			Date of Receipt
	Mailing Address One North Franklin			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Millis	State MA	Zip Code 60606-3436	Transaction ID: PR327877824482 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		120.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupatio Regional	n Executive	
	Receipt For: Primary General Other (specify) ▼	Aggregate	9 Year-to-Date ▼ 920.00	P/R Deduction (\$40.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. George F. Bergstrom			Date of Receipt
	Mailing Address 130 North Garland Cou #3002	urt		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Chicago	State IL	Zip Code 60602-4750	Transaction ID: PR327895724482 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		135.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupatio Vice Pres	sident	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 910.00	P/R Deduction (\$45.00 Bi- Weekly)
_	SUBTOTAL of Receipts This Page (optional)	l		375.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	ν)	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may	y not be sold or used by any person	n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)	the name and day	areas or any political committee to	Solicit Contributions from Sacri Committee.
American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Ms. Eileen M. Collins Offner			Date of Receipt
Mailing Address 325 Seventh Street Suite 700	M M / D D / Y Y Y Y Y Y 1 1 1 2 2 2 2 2 0 1 0		
City	State	Zip Code	Transaction ID: PR327906124482
Washington	DC	20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		42.00
Name of Employer American Hospital Associa- tion-Washingt		Policy Development	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 322.00	P/R Deduction (\$14.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Judy Williams			Date of Receipt
Mailing Address One North Franklin	11 22 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	State	Zip Code	Transaction ID: PR327918924482
Chicago	IL	60606	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		42.00
Name of Employer American Hospital Associa- tion-Chicago	Occupatio Director	n Membership	1
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		322.00	P/R Deduction (\$14.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Mr. Richard J. Umbdenstock			Date of Receipt
Mailing Address 325 Seventh Street Suite 700	, NW		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: PR328132824482
Washington	DC	20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		120.00
Name of Employer American Hospital Associa- tion-Washingt	- ' '	t and Chief Executive Officer	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		920.00	P/R Deduction (\$40.00 Bi- Weekly)
SUBTOTAL of Receipts This Page (optional	1		204.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate scheduler for each category of the Detailed Summary Page	(Check only one)
A 0	ny information copied from such Reports and r for commercial purposes, other than using the	Statements may not be sold or used by any e name and address of any political comm	y person for the purpose of soliciting contributions ittee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Barbara Lorsbach		Date of Receipt
	Mailing Address 204 7th Ave		11 22 7 2010
	City La Grange	State Zip Code IL 60525-6406	Transaction ID: PR328136924482 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	120.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Sr. Vice President, Member Rel	ations
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 920.0	I I WEEKIV)
_	Full Name (Last, First, Middle Initial) Ms. Lauren A. Barnett	Date of Receipt	
	Mailing Address One North Franklin S	1 1 2 2 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State Zip Code	Transaction ID: PR328174924482
	Chicago IL 60606		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	42.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Executive Director, SHSMD	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	322.0	0 P/R Deduction (\$14.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Donna J. Melkonian		Date of Receipt
	Mailing Address 5545 North Wayne		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR328223824482
	Chicago	IL 60640-1318	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	120.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 920.0	0 P/R Deduction (\$40.00 Bi- Weekly)
Γ	SURTOTAL of Receipts This Page (optional)		282.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 210 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 1
A	ny information copied from such Reports and of for commercial purposes, other than using the	Statements may not be sold or used by any per ename and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
<u></u>	Full Name (Last, First, Middle Initial) Mr. Ron O. Purcell		Date of Receipt
	Mailing Address 1093 N. Faldo Way		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR328241424482
	Eagle	ID 83616-5369	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	60.00
	Name of Employer American Hospital Associa-	Occupation Regional Executive	
	tion-Chicago Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	460.00	P/R Deduction (\$20.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Richard J. Pollack	<u> </u>	Date of Receipt
	Mailing Address 3475 North Venice St	1 1 2 2 2 2 0 1 0	
	City	State Zip Code	Transaction ID: PR328260924482
	Arlington	VA 22207-4446	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	120.00
	Name of Employer American Hospital Associa-	Occupation Executive Vice President	
	tion-Washingt Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	920.00	P/R Deduction (\$40.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Lori M. Schor	<u> </u>	Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	W	1 1 2 2 2 0 1 0
	City	State Zip Code	Transaction ID: PR328341824482
	Washington	DC 20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	120.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Director, Political Action & Grassro	ot
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 930.00	P/R Deduction (\$40.00 Bi- Weekly)
	NIDTOTAL (D. 11. TU. D. 11. T. 11.		300.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 211 / 261 (check only one) X
0	ny information copied from such Reports and St r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements mand add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	American Hospital Association PAC			
	Full Name (Last, First, Middle Initial) Ms. Carla L. Luggiero			Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700		7: 0 1	111 22 2010
	City Washington	State DC	Zip Code 20004-2818	Transaction ID: PR328490124482 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20004 2010	30.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupatio Senior A	n ssociate Director	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 230.00	P/R Deduction (\$10.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Carolyn Forcina			Date of Receipt
	Mailing Address 200 Clover Hill Court			11 22 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR328511824482
	Yardley	PA	19067-5736	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		120.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupatio Regional	n Executive	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		920.00	P/R Deduction (\$40.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Alicia N. Mitchell			Date of Receipt
	Mailing Address 1501 N. Harrison Stree	et		11 22 7 2010
	City	State	Zip Code	Transaction ID: PR328512024482
	Arlington	VA	22205-2726	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		60.00
	Name of Employer American Hospital Associa- tion-Washingt		ice President, Communication	ons
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 460.00	P/R Deduction (\$20.00 Bi- Weekly)
\lceil	SUBTOTAL of Receipts This Page (optional)			210.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule for each category of the Detailed Summary Pag	(check only one)
, c	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements may not be sold or used by an name and address of any political comm	y person for the purpose of soliciting contributions ittee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
. <u>/</u>	Full Name (Last, First, Middle Initial) Mr. George Arges		Date of Receipt
	Mailing Address One North Franklin St.		11 22 7 2010
	City Chicago	State Zip Code IL 60606	Transaction ID: PR328641124482 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	60.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For: Primary General	Occupation Senior Director, Health Data Ma Aggregate Year-to-Date ▼	
	Other (specify) ▼	460.0	I WEEKIV)
	Full Name (Last, First, Middle Initial) Mr. Anthony J. Burke Mailing Address One North Franklin Av		Date of Receipt
		11 22 2010	
	City Chicago	State Zip Code IL 60606	Transaction ID: PR328913324482
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 120.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation President & CEO, AHA Solution	ns, Inc. &
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 920.0	P/R Deduction (\$40.00 Bi-Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Rebecca Chickey		Date of Receipt
	Mailing Address One North Franklin Str	eet	1 1 2 2 2 0 1 0
	City	State Zip Code	Transaction ID: PR329013424482
	Chicago FEC ID number of contributing federal political committee.	IL 60606	Amount of Each Receipt this Period 60.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation SPSA Director	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 460.0	P/R Deduction (\$20.00 Bi- Weekly)
	CURTOTAL of Descripts This Days (antique)		240.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 213 / 261 (check only one) X
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAGE	C		
Full Name (Last, First, Middle Initial) Dr. John R. Combes			Date of Receipt
Dr. John R. Combes Mailing Address One North Franklin			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: PR329071324482
Chicago	IL	60606-3436	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		120.00
Name of Employer American Hospital Associa- tion-Chicago	Occupatio Presiden	n t & Chief Operating Officer, (<u> </u>
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 920.00	P/R Deduction (\$40.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Robyn Cooke			Date of Receipt
Mailing Address 325 Seventh Street Suite 700	11 22 7 2010		
City	State DC	Transaction ID: PR329084424482	
Washington FEC ID number of contributing federal political committee.	C	20004-2818	Amount of Each Receipt this Period 60.00
Name of Employer American Hospital Associa- tion-Washingt	Occupatio Senior A	n ssociate Director	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 460.00	P/R Deduction (\$20.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Mr. W. Thomas Deweese			Date of Receipt
Mailing Address 500 Interstate Boul	evard South		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: PR329215724482
Nashville	TN	37210-4634	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		120.00
Name of Employer American Hospital Associa- tion-Chicago		gional Executive	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 920.00	P/R Deduction (\$40.00 Bi- Weekly)
SUBTOTAL of Receipts This Page (optional	al)l		300.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 214 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and Stor for commercial purposes, other than using the	atements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. John Evans		Date of Receipt
Mailing Address One North Franklin Str		111 22 2 2010
City Chicago	State Zip Code IL 60606	Transaction ID: PR329342624482 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	42.00
Name of Employer American Hospital Associa- tion-Chicago	Occupation Senior Vice President & CFO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 322.00	P/R Deduction (\$14.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Audrey L. Harris		Date of Receipt
Mailing Address 1136 W. Farwell Ave.		11 22 7 2010
City	State Zip Code	Transaction ID: PR329654224482
Chicago	IL 60626-3861	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	42.00
Name of Employer American Hospital Associa- tion-Chicago	Occupation Executive Director, ASDVS	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 322.00	P/R Deduction (\$14.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) Ms. Patricia Meersman		Date of Receipt
Mailing Address One North Franklin		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Chicago	State Zip Code II 60606-3436	Transaction ID: PR330343324482
FEC ID number of contributing federal political committee.	IL 60606-3436	Amount of Each Receipt this Period 60.00
Name of Employer American Hospital Associa- tion-Chicago	Occupation Senior Director Member Relations	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	P/R Deduction (\$20.00 Bi- Weekly)
SUBTOTAL of Receipts This Page (optional)		144.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 215 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 1
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may not be sold or used by any persename and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Mr. Thomas Misfeldt		Date of Receipt
	Mailing Address One North Franklin		1 1 2 2 Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR330411624482
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	60.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Associate Regional Executive	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	460.00	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Maureen D. Mudron	<u> </u>	Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State Zip Code	Transaction ID: PR330465224482
	Washington	DC 20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	42.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Deputy General Counsel	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	322.00	P/R Deduction (\$14.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Paul N. Muraca	<u> </u>	Date of Receipt
	Mailing Address 4960 138th Circle Wes	st	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR330475424482
	Apple Valley	MN 55124-9229	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	120.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Regional Executive	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	920.00	P/R Deduction (\$40.00 Bi- Weekly)
Γ	CURTOTAL of Descipts This Dags (entianel)		222.00

ITEMIZED RECEIPTS	,	Use separate schedule(s) for each category of the Detailed Summary Page	Check only one) X 11a		
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may	y not be sold or used by any perso	on for the purpose of soliciting contributions		
NAME OF COMMITTEE (In Full)	ne name and ad	areas or arry pointed committee to	Solioti Contributions from Such Committee.		
American Hospital Association PAC					
Full Name (Last, First, Middle Initial) Ms. Jennifer E. Mallard			Date of Receipt		
Mailing Address 1025 Connecticut Av Suite 1000					
City	State	Zip Code	Transaction ID: PR330534324482		
Washington	DC	20036-5417	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		40.00		
Name of Employer American Hospital Associa- tion-Washingt	Occupatio Senior A	n ssociate Director			
Receipt For:	Aggregate	e Year-to-Date ▼			
Primary General Other (specify) ▼	0 0	440.00	P/R Deduction (\$20.00 Bi- Weekly)		
Full Name (Last, First, Middle Initial) Mr. Gene O'Dell			Date of Receipt		
Mailing Address One North Franklin	11 22 7 2010				
City	State	Zip Code	Transaction ID: PR330547724482		
Chicago	IL	60606-3436	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		60.00		
Name of Employer American Hospital Associa- tion-Chicago	Occupatio Vice Pres	n sident, Strategic Planning			
Receipt For:	Aggregate	e Year-to-Date ▼			
Primary General Other (specify) ▼		460.00	P/R Deduction (\$20.00 Bi- Weekly)		
Full Name (Last, First, Middle Initial) Ms. Eileen O'Keefe			Date of Receipt		
Mailing Address 172 Atteridge			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	State	Zip Code	Transaction ID: PR330549224482		
Lake Forest	IL	60045-1715	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		120.00		
Name of Employer American Hospital Associa- tion-Chicago		sident, Constituency Section			
Receipt For:	Aggregate	e Year-to-Date ▼	. [
Primary General Other (specify) ▼		920.00	P/R Deduction (\$40.00 Bi- Weekly)		
SUBTOTAL of Receipts This Page (optional)	1		220.00		

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedu for each category of the Detailed Summary Pa	the age X 11a 11b 11c 12
Any information copied from such Reports an	d Statements may not be sold or used by	any person for the purpose of soliciting contributions
	the name and address of any political com	nmittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Anthony Spohn		Date of Receipt
Mailing Address 3219 N. Oriole		1 1 2 2 2 2 0 1 0
City	State Zip Code	Transaction ID: PR331098324482
Chicago	IL 60634-3232	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	60.00
Name of Employer American Hospital Associa- tion-Chicago	Occupation Executive Director, Associate	Membersh
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	460	P/R Deduction (\$20.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Debi H. Tucker, Esq.		Date of Receipt
Mailing Address 1101 N. Kentucky S	treet	11 22 7 2010
City	State Zip Code	Transaction ID: PR331278824482
Arlington	VA 22205-3515	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	42.00
Name of Employer American Hospital Associa-	Occupation	
tion-Washingt	Director, State Issues Forum	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	322	P/R Deduction (\$14.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Darlene S. Vanderbush		Date of Receipt
Mailing Address 26 West Glendale A	ve.	1 1 2 2 Y Y Y Y Y
City	State Zip Code	Transaction ID: PR331304224482
Alexandria	VA 22301-2402	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	159.99
Name of Employer American Hospital Associa- tion-Washingt	Occupation Director Advocacy and Public	: Policy Op
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	893	P/R Deduction (\$53.33 Bi- Weekly)
		261.99

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 218 / 261 (check only one) X 11a
0	Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	American Hospital Association PAC			
۱.	Full Name (Last, First, Middle Initial) Ms. Jo Ann Webb			Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700			11 22 2 2010
	City Washington	State DC	Zip Code 20004-2818	Transaction ID: PR331379124482 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1 1 1 1 1 1	42.00
	Name of Employer American Hospital Associa- tion-Washingt Receipt For:		n tor Federal Relations & Polic Year-to-Date V	
	Primary General Other (specify) ▼	Aggregate	322.00	P/R Deduction (\$14.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Judy Weinsheimer			Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	N		11 22 7 2010
	City	State DC	Zip Code	Transaction ID: PR331386924482
	Washington FEC ID number of contributing federal political committee.	C	20004-2818	Amount of Each Receipt this Period 42.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior As	n ssociate Director	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 322.00	P/R Deduction (\$14.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Alex R. White, Sr.			Date of Receipt
	Mailing Address 6225 US Hwy 290 E			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR331416024482
	Austin FEC ID number of contributing federal political committee.	C	78761-5587	Amount of Each Receipt this Period 180.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation AHA Reg	n gional Executive for TX	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1380.00	P/R Deduction (\$60.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)			264.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 219 / 261 (check only one) X 11a
A 0	for commercial purposes, other than using the	tatements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
۸.	Full Name (Last, First, Middle Initial) Mr. Woodin Dale		Date of Receipt
	Mailing Address 800 W. Central Road	Otata Zin Oada	11 22 2010
	City Arlington Heights	State Zip Code IL 60005-2349	Transaction ID: PR331481324482 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	42.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Executive Director, ASHE	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 322.00	P/R Deduction (\$14.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Donald May		Date of Receipt
	Mailing Address 521 Great Falls St.		11 22 YYYYY 2010
	City	State Zip Code	Transaction ID: PR331533224482
	Falls Church	VA 22046-2613	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	120.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Vice President, Policy	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 920.00	P/R Deduction (\$40.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Elizabeth Summy		Date of Receipt
	Mailing Address One North Franklin		11 22 7 2010
	Chicago	State Zip Code	Transaction ID: PR346168124482
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	120.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President, PMG	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 920.00	P/R Deduction (\$40.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)		282.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 220 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 1
A	ny information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Ms. Kristin Welsh			Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700			11 22 7 2010
	City Washington	State DC	Zip Code 20004-2818	Transaction ID: PR517619724482 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20004 2010	120.00
	Name of Employer American Hospital Associa- tion-Washingt Receipt For: Primary General Other (specify) ▼	1100 110	n sident Executive Branch Rela e Year-to-Date ▼ 920.00	P/R Deduction (\$40.00 Bi-Weekly)
	Full Name (Last, First, Middle Initial) Ms. Megan Cundari			Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	V		11 22 2010
	City	State	Zip Code	Transaction ID: PR518031924482
	Washington FEC ID number of contributing federal political committee.	C	20004-2818	Amount of Each Receipt this Period 90.00
	Name of Employer American Hospital Associa- tion-Washingt Receipt For:		n ssociate Director	
	Primary General Other (specify) ▼	, iggi ogaic	690.00	P/R Deduction (\$30.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Laura M. Werner			Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	V		11 22 7 2010
	City Washington	State DC	Zip Code 20004-2818	Transaction ID: PR560101524482
	FEC ID number of contributing federal political committee.	C	20004-2010	Amount of Each Receipt this Period 42.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupatio Project N		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 322.00	P/R Deduction (\$14.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)			252.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 221 / 261 (check only one) X 11a 11b 11c 12 13 14 15 16 11
A C	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may not be sold or used by any perso a name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
. ∠ \.	Full Name (Last, First, Middle Initial) Mr. Carlos Jackson		Date of Receipt
	Mailing Address 325 Seventh Street, N		11 22 YYYY 2010
	City	State Zip Code DC 20004-2802	Transaction ID: PR566280924482
	Washington FEC ID number of contributing federal political committee.	DC 20004-2802	Amount of Each Receipt this Period 60.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Associate Director, Federal Relations	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 460.00	P/R Deduction (\$20.00 Bi- Weekly)
- i.	Full Name (Last, First, Middle Initial) Ms. Ashley B. Thompson		Date of Receipt
	Mailing Address 606 S. Royal St.		1 1 2 2 2 2 0 1 0
	City	State Zip Code	Transaction ID: PR766023724482
	Alexandria	VA 22314-4142	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	60.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Director, Policy	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	460.00	P/R Deduction (\$20.00 Bi- Weekly)
. –	Full Name (Last, First, Middle Initial) Ms. Rochelle M. Archuleta		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	W	1 1 2 2 2 2 0 1 0
	City	State Zip Code	Transaction ID: PR801366324482
	Washington	DC 20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	42.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Associate Director Policy	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 322.00	P/R Deduction (\$14.00 Bi- Weekly)
Г			162.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 222 / 261 (check only one) X 11a
0	Any information copied from such Reports and St r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may r name and addro	not be sold or used by any perso ess of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
/	American Hospital Association PAC Full Name (Last, First, Middle Initial)			1
۱.	Ms. Lisa Kidder Hrobsky Mailing Address 325 Seventh Street, NV	N		Date of Receipt
	Suite 700			11 22 2010
	City Washington	State DC	Zip Code	Transaction ID: PR876637224482
	FEC ID number of contributing federal political committee.	C	20004-2818	Amount of Each Receipt this Period 60.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Vice Presiden	dent, Legislative Affairs	
	Receipt For: Primary General Other (specify)	Aggregate Y	'ear-to-Date ▼ 460.00	P/R Deduction (\$20.00 Bi- Weekly)
 3.	Full Name (Last, First, Middle Initial) Ms. Jennifer Armstrong Gay			Date of Receipt
	Mailing Address 10702 Benning Way			1 1 2 2 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR928186524482
	Spotsylvania	VA	22551-4670	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		47.73
	Name of Employer American Hospital Associa- tion-Washingt	. '	ommunication Strategies	
	Receipt For: Primary General Other (specify)	Aggregate Y	/ear-to-Date ▼ 318.20	P/R Deduction (\$15.91 Bi- Weekly)
. –	Full Name (Last, First, Middle Initial) Ms. Sheila R. Meadows			Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700			11 22 7 9 10
	City	State DC	Zip Code	Transaction ID: PR936292324482
	Washington FEC ID number of contributing federal political committee.	C	20004-2818	Amount of Each Receipt this Period 42.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Dire	ector of Operations	
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 322.00	P/R Deduction (\$14.00 Bi- Weekly)
Γ,	SUBTOTAL of Receipts This Page (optional)			149.73

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 223 / 261 Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 14 16 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. David A. Strickland Date of Receipt Mailing Address One N. Franklin Street 1.1 22 2010 City State Zip Code **Transaction ID:** PR939603924482 Chicago IL 60606 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Name of Employer American Hospital Associa-tion-Chicago Occupation **Executive Director Quality Center** Receipt For: Aggregate Year-to-Date General Primary P/R Deduction (\$14.00 Bi-322.00 Weekly) Other (specify)

SUBTOTAL of Receipts This Page (optional)	•	42.00
TOTAL This Period (last page this line number only)	•	201065.69

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 224 / 261 (check only one) 11a 11b 11c X 12 13 14 15 16
Any information copied from such Reports and Si or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) California Healthcare Association PAC - Federal		Date of Receipt
Mailing Address 1215 K Street Suite 800 City	State Zip Code	10 15 2010
Sacramento	CA 95814	Transaction ID: 18680974 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C C00237495	10000.00
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 110000.00	
Full Name (Last, First, Middle Initial) Hospital and Healthsystem Assoc. of PA - Federa Mailing Address Post Office Box 8600	I Political Action Comm (HAPAC)	Date of Receipt 1 0 1 8 2 0 1 0
City	State Zip Code	Transaction ID: 18681080
<u>Harrisburg</u>	PA 17105-8600	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C C00128082	10000.00
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 80000.00	
Full Name (Last, First, Middle Initial) Wisconsin Hospital Association Federal PAC		Date of Receipt
Mailing Address 5510 Research Park D	rive	10 19 2010
City	State Zip Code	Transaction ID: 18681777
Madison FEC ID number of contributing federal political committee.	WI 53725-9038 C C00359455	Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 9182.61	
SUBTOTAL of Receipts This Page (optional)		21000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 225 / 261 (check only one) 11a 11b 11c X 12 13 14 15 16 1
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) California Healthcare Association PAC - Federal Mailing Address 1215 K Street Suite 800 City Sacramento FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State Zip Code CA 95814 C C00237495 Occupation Aggregate Year-to-Date ▼	Date of Receipt M M M 28 2010 Transaction ID: 18696887 Amount of Each Receipt this Period 15000.00
Full Name (Last, First, Middle Initial) Texas Hospital Association HOSPAC - Federal Mailing Address P.O. Box 15587 City Austin FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State Zip Code TX 78761-5587 C C00301325 Occupation Aggregate Year-to-Date ▼ 94800.00	Date of Receipt M M M O 3 2010 Transaction ID: 18720160 Amount of Each Receipt this Period 30000.00
Full Name (Last, First, Middle Initial) Wisconsin Hospital Association Federal PAC Mailing Address 5510 Research Park D City Madison FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	rive State Zip Code WI 53725-9038 C C00359455 Occupation Aggregate Year-to-Date ▼	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		45800.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s)	FOR LINE NUMBER: PAGE 226 / 261	
			for each category of the	(check only one)	
	II LIMIZED RECEIP 13		Detailed Summary Page	11a 11b 11c X 12	
				13 14 15 16 17	
	Any information copied from such Reports and Sta or for commercial purposes, other than using the r	atements may name and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full)				
	American Hospital Association PAC			_	
Α.	Full Name (Last, First, Middle Initial) California Healthcare Association PAC - Federal	Date of Receipt			
	Mailing Address 1215 K Street Suite 800	M M / D D / Y Y Y Y Y Y 1 1 1 2 2 2 2 0 1 0			
	City	State	Zip Code	Transaction ID: 18756426	
	Sacramento	CA	95814	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C C00	237495	10000.00	
	Name of Employer	Occupation	n		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 135000.00		
В.	Full Name (Last, First, Middle Initial) Health Care Leadership Committee - Federal			Date of Receipt	
	Mailing Address Post Office Box 270496			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State	Zip Code	Transaction ID: 18756604	
	St. Louis	MO	63127-0496	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C C00	0323576	5000.00	
	Name of Employer	Occupation	n		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 5000.00		

SUBTOTAL of Receipts This Page (optional)	•	15000.00
TOTAL This Period (last page this line number only)	•	81800.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 227 / 261 (check only one) 11a 11b 11c 12 13 14 15 X 16 17
	nd Statements may not be sold or used by any per the name and address of any political committee	
NAME OF COMMITTEE (In Full) American Hospital Association PA	C	
Full Name (Last, First, Middle Initial) Castle Campaign Fund Mailing Address PO Box 133 City	State Zip Code	Date of Receipt 10 15 2010 Transaction ID: 18681029
Wilmington FEC ID number of contributing federal political committee.	DE 19899 C C00254938	Amount of Each Receipt this Period 4000.00
Name of Employer Receipt For: 2010 Primary X General Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 4000.00	

SUBTOTAL of Receipts This Page (optional)	•	4000.00
TOTAL This Period (last page this line number only)	<u> </u>	4000.00

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 228 / 261
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) 11a
Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full)		
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Citibank, F.S.B.		Date of Receipt
Mailing Address 1400 G Street, NW		10 29 2010
City	State Zip Code	Transaction ID: 18726767
Washington	DC 20005	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	132.21
Name of Employer	Occupation	1
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2085.70	Interest

SUBTOTAL of Receipts This Page (optional)	•	132.21
TOTAL This Period (last page this line number only)	•	132.21

		LE B (FEC Form 3X) Use separate schedule							INE NUMBER: PAGE 229 / 261 sonly one)									
11	EMIZED DI	SBURSEMEN	NIS		category of the Summary Page		X	21 27	b [22 28a		23 28b	24 28c		25 29	\Box		
		ed from such Report rposes, other than us														s		
\	NAME OF COM	MITTEE (In Full)																
/	American Hos	pital Association I	PAC															
	Full Name (Last, GMMB	First, Middle Initial)										ion ID:	: 1867	6315	5			
	Mailing Address	1010 Wissons	in Aug NIA	,							_		5 /	Y	2 0 1 (0 ^Y		
		1010 Wiscons Suite 800												_				
	City Washington			State DC	Zip Code 20007					Amou	int c	f Each	Disburs					
	Purpose of Disbu	ursement nd Production, See L	ine 24			Г	004	1	7		-			1190	92.00)		
	Candidate Name						atego	ory/										
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	State:	District:																
	Citibank, F.S.I	First, Middle Initial) 3.										isburs		6766	3			
	Mailing Address	1400 G Street	, NW							1 ^M 0	М	/ D 1	9 /	Y	2 0 1 (0 Y		
	City Washington			State DC	Zip Code 20005					Amou	ınt c	f Each	Disburs	emer	nt this	Perio		
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	Candidate Name					С	atego Type	•										
	Office Sought:	House Senate President	Disburse	ement For: Primary Other (sp	General ecify)					Bank	Fee	Э						
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	American Exp	First, Middle Initial) ress								Date	of D	isburs						
	Mailing Address	Ste. 001								1 ^M 1	М	[/] DC	2 /	Y	2 0 1 (0		
	City Chicago			State IL	Zip Code 60679					Amou	ınt c	f Each	Disburs	emer	nt this	Perio		
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	Candidate Name	!					atego	ory/										
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TOTAL This Period (last page this line number only)

C.

SCHEDULE B (FEC Form 3X)		arate schedule(s)			OR LIN			R:			PAG	ìΕ	230 /	261	
ITEMIZED DISBURSEMENTS		category of the Summary Page		X	_	Ĥ	22 28a		23 28b	24	L	_	25 29	$oldsymbol{\square}$	26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name															
NAME OF COMMITTEE (In Full) American Hospital Association PAC															
Full Name (Last, First, Middle Initial) American Express Mailing Address Ste. 001							Trans		sburse		551		o i c	Y	
•	State IL	Zip Code 60679					Amou	nt o	f Each	Disbu	sem	ent	this F	erioc	<u>.</u>
Purpose of Disbursement Merchant Fees Candidate Name	mont For		Са	ate	01 egory/ /pe				•		•	5	50.71		
Office Sought: House Disburse Senate President State: District: Full Name (Last, First, Middle Initial)	ment For: Primary Other (spe	General cify) ▼					Merch								
Merchant Bankcard Mailing Address 1601 Elm Street							Date of		sburse		551 Y		o í o	Y	
City Dallas	State TX	Zip Code 75201					Amou	nt o	f Each	Disbu	sem	ent	this F	erioc	d l
Purpose of Disbursement Merchant Fees Candidate Name	TX.	73201	Са	ate	01 egory/				•			8	37.40		
Office Sought: Senate President State: Disburse	ement For: Primary Other (spe	General		Ту	/pe		Merch	ant	: Fees	3					
Full Name (Last, First, Middle Initial) Paymentech							Trans	of D	sburse	ement	551	93			
Mailing Address 14221 Dallas Parkway Building Two							1 1	М	0	4 /	Y	ž	0 i 0	Y	
Dallas	State TX	Zip Code 75254					Amou	nt o	f Each	Disbu	sem		-	-	i I
Purpose of Disbursement Merchant Fees Candidate Name			Са	ate	01 egory/							18	92.46		
Office Sought: House Disburse Senate President	ment For: Primary	General		·y	rpe		Merch	ant	Fees	3					
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SUBTOTAL of Disbursements This Page (optional)												33	0.57		

TOTAL This Period (last page this line number only)

В.

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		FOR LIN		ER:	PA	AGE 2	31 / 261
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		X 21b 27	22 28a	23 28b	24 28c	$\begin{bmatrix} 2 \\ 2 \end{bmatrix}$	
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name								
NAME OF COMMITTEE (In Full)								
American Hospital Association PAC								
Full Name (Last, First, Middle Initial) Citibank, F.S.B.					saction ID		5199	
Mailing Address 1400 G Street, NW				1 1	M / D	18 /	ž 0	1 0 Y
•	State Zip Code			Amo	ount of Each	n Disburse	ement th	nis Period
Washington	DC 20005						00	70
Purpose of Disbursement Bank Fee			001				62	2.72
Candidate Name			tegory/ ype					
Senate President	ment For: Primary General Other (specify)			Bank	k Fee			
State: District:								
Full Name (Last, First, Middle Initial) Multi Media Services Corporation					saction ID of Disburs		2869	
Mailing Address 915 King Street				1 O) M / D	19 /	ž0	10
City Alexandria	State Zip Code VA 22314			Amo	ount of Each	n Disburse	ement th	nis Period
Purpose of Disbursement TV & Radio Advertising & Production, See Line 24			004				35000	0.00
Candidate Name			tegory/ ype					
Senate President	ment For: Primary General Other (specify)			TV 8 Prod	Radio A luction, S	dvertisin ee Line 2	g & 24	
State: District:								
Full Name (Last, First, Middle Initial) Multi Media Services Corporation					nsaction ID of Disburs		2870	
Mailing Address 915 King Street				1 ^M C) ^M / D	20 /	ž0	10
City Alexandria	State Zip Code VA 22314			Amo	ount of Each	n Disburse	ement th	nis Period
Purpose of Disbursement TV & Radio Advertising & Production, See Line 24		(004				65000	0.00
Candidate Name		Cat	tegory/ ype					
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SUBTOTAL of Disbursements This Page (optional)			🕨			-9	9937	.28

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Transaction Disbursement Transaction Disbursement Disbu	SCHEDULE B (FEC	Form 3X)	Use sep	arate schedule(s)		FOR LIN	_		R:		P/	AGE	232 /	261		
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Multi Media Services Corporation Mailing Address 915 King Street City Alexandria VA 22314 Purpose of Disbursement TV & Radio Advertising & Production, See Line 24 Candidate Name Office Sought: House State Prisident Suite 306 City Tull Name (Last, First, Middle Initial) Mentzer Media Mailing Address 600 Fairmount Avenue Suite 306 City Towson Office Sought: House Senate Prisident Television Advertising & Production, See Line 24 Candidate Name Office Sought: House Senate Disbursement For: Category' Type Office Sought: House Senate Disbursement For: Senate Senate Primary General Other (specify) ▼ Transaction ID: 18780631 Amount of Each Disbursement Talevision Advertising & Production, See Line 24 Cardidate Name Transaction ID: 18780631 Amount of Each Disbursement Television Advertising & Production, See Line 24 Cardidate Name Office Sought: House Senate Disbursement For: Senate Suite 306 City Towson Mailing Address 600 Fairmount Avenue Suite 306 City Towson State: District: Full Name (Last, First, Middle Initial) Mentzer Media Mailing Address 600 Fairmount Avenue Suite 306 City Towson State: District: Full Name (Last, First, Middle Initial) Mentzer Media Mailing Address 600 Fairmount Avenue Suite 306 City Towson Mid 21286 Purpose of Disbursement Television Advertising & Production, See Line 24 Candidate Name Office Sought: Other (specify) ▼ Transaction ID: 18780870 Date of Disbursement this P. Television Advertising & Production, See Line 24 Candidate Name Office Sought: Other (specify) ▼ Television Advertising & Production, See Line 24 Candidate Name Office Sought: Other (specify) ▼ Television Advertising & Production, See Line 24 Candidate Name Office Sought: Other (specify) ▼ Television Advertising & Production, See Line 24 Candid	ITEMIZED DISBURS	EMENTS	for each	category of the		X 21b	<u></u>	2						26		
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Office Sought: House Senate Primary General Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) Mentzer Media Mailing Address 600 Fairmount Avenue Suite 306 City State Zip Code Towson MD 21286 Purpose of Disbursement Television Advertising & Production, See Line 24 Candidate Name Office Sought: House Senate Primary General Other (specify) ▼ Transaction ID: 18780870 Date of Disbursement Mo	•	duction, See Line 24				004	7 L		_		-	7840	00.00	_		
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Mentzer Media Mailing Address 600 Fairmount Avenue Suite 306 City State Zip Code MD 21286 Purpose of Disbursement Television Advertising & Production, See Line 24 Candidate Name Disbursement For: Senate President President Other (specify) ▼ State: District: Mailing Address 600 Fairmount Avenue State Zip Code MD 21286 Amount of Each Disbursement this Page (optional) Television Advertising & Production, See Line 24	Senat Presid	e	Primary				Te Pr	elevi odu	sion ctior	Adv 1, Se	ertising e Line 2	& 24				
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	y Information copied from such Reports and State or commercial purposes, other than using the nar					
\rangle	NAME OF COMMITTEE (In Full) American Hospital Association PAC	,,				
<u>' </u>	Full Name (Last, First, Middle Initial) Blumenthal For Senate					Transaction ID: 18689454 Date of Disbursement
	Mailing Address 777 Summer Street					10 M 7 22 Y 2010
	City Stamford	State Zip Code CT 06901				Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution			01	1.	5000.00
	Candidate Name Mr. Richard Blumenthal			ate Ty	gory/ oe	
	χ Senate President	sement For: 2010 Primary X General Other (specify)				Contribution
	State: CT District: Full Name (Last, First, Middle Initial) Committee To Reelect Congressman Chi	is Smith				Transaction ID: 18689457 Date of Disbursement
	Mailing Address P.O. Box 3184					- 10
	City Hamilton	State Zip Code NJ 08619				Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution			01	1	250.00
	Candidate Name Rep. Christopher H. Smith			ate Ty	gory/ oe	
	Office Sought: X House Disburs Senate President State: NJ District: 04	sement For: 2010 Primary X General Other (specify) ▼	1			Contribution
	Full Name (Last, First, Middle Initial) Sanford D. Bishop, Jr. For Congress					Transaction ID: 18689459 Date of Disbursement
	Mailing Address P. O. Box 909					10 M / 22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Columbus	State Zip Code GA 31902				Amount of Each Disbursement this Period
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	Candidate Name Rep. Sanford D. Bishop, Jr.			ate Ty	gory/ oe	
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				erson for the purpose of soliciting contributions e to solicit contributions from such committee
	NAME OF COMMITTEE (In Full) American Hospital Association Pa	<u> </u>	7,1	
<u> </u>	Full Name (Last, First, Middle Initial) Friends Of John Barrow			Transaction ID: 18689460 Date of Disbursement
	Mailing Address PO Box 8166			10 22 2010
	City Savannah	State Zip (GA 314	Code 112	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution Candidate Name		011	2000.00
	Rep. John Barrow Office Sought: X House	Disbursement For:	Categor Type	
	Senate President State: GA District: 12		General	Contribution
	Full Name (Last, First, Middle Initial) Friends Of Jim Marshall			Transaction ID: 18689461 Date of Disbursement
	Mailing Address 586 Orange Str	eet		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City Macon	State Zip G GA 312	Code 201	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution		011	2000.00
	Candidate Name Rep. Jim Marshall		Categor Type	y/
	Office Sought: X House Senate President State: GA District: 08		2010 General	Contribution
	State: GA DISTRICT. VO			
	Full Name (Last, First, Middle Initial) Paul Broun Committee			Transaction ID: 18689462 Date of Disbursement
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	Full Name (Last, First, Middle Initial) Paul Broun Committee	State Zip 0 GA 306	Code 601	Date of Disbursement M M M D 2 2 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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or for commercial purposes, other than using the nan	ne and address of any politica	l com	nm	ittee to	solic	it contr	ibuti	ions 1	ror	m such	comi	mittee	
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Full Name (Last, First, Middle Initial)										18689	9463	3	
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Mailing Address P.O. Box 822						10		Ľ	2 :	2	2	01)
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Tom Reed For Congress						Date	of Di				v · \	/ * V *	V
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	ement For: 2010	<u> </u>	' '	/pe									
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President State: NY District: 29	Other (specify)												
Full Name (Last, First, Middle Initial)						Tuona		a	٠.	18690	0040	<u> </u>	
SAC PAC						Date		-)940)	
Mailing Address 6380 Wilshire Blvd., #10	612					1 ^M 0	М	/ D	2 (0 /	Ž	2 0 1) Y
City Los Angeles, CA 90	State Zip Code					Amou	int o	f Eac	h [Disburse	emer	nt this	Period
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Full Name (Last, First, Middle Initial) WEDGEPAC Mailing Address PO Box 680063					Date o	of Disbu	ID: 18 ursemer		7 Ž 0 Ĭ 0	Y
City Franklin	State Zip Code TN 37068				Amou	nt of Ea	ach Disk	ourseme		-
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City Elmhurst Purpose of Disbursement	State Zip Code NY 11373	T		-	Amou	nt of Ea	ach Dist	ourseme 20	nt this F	
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Office Sought: House Senate President State: District:	ement For: Primary Genera Other (specify) ▼	l			2010	Contril	bution			
Full Name (Last, First, Middle Initial) Walden For Congress					Date o	of Disbu	ırsemer		_	
Mailing Address PO Box 1091					1 ^M 0	M /	^D 2 0	/	2010	Y
City Hood River	State Zip Code OR 97031				Amou	nt of Ea	ach Disk	ourseme		-
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NAME OF COMMITTEE (In Full)	le and address of any political	COMMIN	iee io s	Olicit Corit	TIDULIOTIS I	TOITI SU	JCH CC	minilee		
American Hospital Association PAC										
Full Name (Last, First, Middle Initial) Friends Of Jeb Hensarling					saction ID of Disburs	semen		73		
Mailing Address PO Box 820504				1 ^M 0	M / D	20	/ Y	ž 0 1	0 ^Y	
City Dallas	State Zip Code TX 75382			Amou	ınt of Eac	h Disb	ursem	nent this	Perio	d
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Candidate Name Rep. Jeb Hensarling		Cateo Typ								
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Full Name (Last, First, Middle Initial)				Trans	saction ID) : 18	6918	27		
Betty Sutton For Congress					of Disburs		t			
Mailing Address 1700 W Market St #155				10	M / D	20	/ L	ž 0 1	0 ^Y	
City Akron	State Zip Code OH 44313			Amou	int of Eac	h Disb	ursem	nent this	Perio	d
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Candidate Name Rep. Betty S. Sutton		Categ	jory/							
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State: OH District: 13										
Full Name (Last, First, Middle Initial) LoBiondo For Congress					of Disburs	semen			V	
Mailing Address P.O. Box 550				1 0		20	Ĺ	ž 0 1		
City Vineland	State Zip Code NJ 08362			Amou	int of Eac	h Disb	ursem	nent this	Perio	d
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Candidate Name Rep. Frank A. LoBiondo		Categ	jory/							
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	Rep. David Wu	γ House	Disburseme	ent For:	2010	Гуре	-	-						
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	Full Name (Last, Jackie Speier F	First, Middle Initial) For Congress	•					Date	of Dist	ourser				
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	City Burlingame		Sta C <i>i</i>		Zip Code 94011			Amo	unt of E	Each D	Disburs		-	_
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	Candidate Name Rep. Jackie Sp		1			tego Type	-							
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Candidate Name Rep. Peter Antho	ony DeFazio					atego	ory/									
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	District: 04		\-\rac{1}{2}													
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Candidate Name Rep. Bill Owens						atego	ory/									
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NAME OF COMMITTEE (In Full)			
American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Steve Cohen For Congress			Transaction ID: 18695685 Date of Disbursement
Mailing Address 349 Kenilworth Place			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} D & D \\ 2 & 0 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} $
City Memphis	State Zip Code TN 38112		Amount of Each Disbursement this Period
Purpose of Disbursement Contribution		011	1000.00
Candidate Name Rep. Stephen Ira Cohen		Category/ Type	
Senate President	ement For: 2010 Primary X General Other (specify)		Contribution
State: TN District: 09			
Full Name (Last, First, Middle Initial) Chuck Fleischmann for Congress			Transaction ID: 18695689 Date of Disbursement
Mailing Address P.O. Box 11091 Suite 1000 James Buildi	ng		
City Chattanooga	State Zip Code TN 37401		Amount of Each Disbursement this Period
Purpose of Disbursement Contribution		011	3000.00
Candidate Name Mr. Charles Fleischmann		Category/ Type	
Senate President	ement For: 2010 Primary X General Other (specify)		Contribution
State: TN District: 03			
Full Name (Last, First, Middle Initial) Diane Black For Congress			Transaction ID: 18695693 Date of Disbursement
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Candidate Name Ms. Diane Black		Category/ Type	
Senate President	ement For: 2010 Primary X General Other (specify)		Contribution
State: TN District: 06			
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NAME OF COMMITTEE (In Full)			
American Hospital Association PAC			
Full Name (Last, First, Middle Initial)	_		Transaction ID: 18695695
Womack For Congress Finance Comm	ittee		Date of Disbursement
Mailing Address 314 W Walnut PO Box 508			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 \end{smallmatrix} \begin{smallmatrix} 0 & M \\ \end{smallmatrix} \begin{smallmatrix} 0 & 2 \end{smallmatrix} \begin{smallmatrix} 0 \\ 2 \end{smallmatrix} \begin{smallmatrix} 0 & 1 \end{smallmatrix} \begin{smallmatrix} 0 & 1 \\ 2 \end{smallmatrix} \begin{smallmatrix} 0 & 1 \end{smallmatrix} \begin{smallmatrix} 0 \\ 0 \\ \end{smallmatrix}$
City Rogers	State Zip Code AR 72757		Amount of Each Disbursement this Period
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Contribution		011	
Candidate Name Mr. Steve Womack		Category/ Type	
-	ursement For: 2010		Contribution
Senate President	Primary X General Other (specify) ▼		
State: AR District: 03	Carter (opens)		
Full Name (Last, First, Middle Initial)			Transaction ID: 18695703
Kansans For Huelskamp			Date of Disbursement
Mailing Address PO Box 410			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 0 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
City Fowler	State Zip Code KS 67844		Amount of Each Disbursement this Period
Purpose of Disbursement Contribution		011	2000.00
Candidate Name Mr. Timothy Huelskamp		Category/ Type	
Senate President	ursement For: 2010 Primary X General Other (specify) ▼		Contribution
State: KS District: 01			
Full Name (Last, First, Middle Initial) Stabenow for U.S. Senate			Transaction ID: 18695704 Date of Disbursement
Mailing Address P.O. Box 4945			$\begin{bmatrix} \begin{smallmatrix} M & 0 & M \\ 1 & 0 & M \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & 2 & 0 \\ 2 & 0 & 0 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & 2 & 0 & 1 & 0 \\ & 2 & 0 & 1 & 0 \end{bmatrix}$
City East Lansing	State Zip Code MI 48826		Amount of Each Disbursement this Period
Purpose of Disbursement 2012 Contribution		011	2500.00
Candidate Name Sen. Debbie Stabenow		Category/ Type	
Office Sought: House X Senate President	Primary X General Other (specify)		2012 Contribution
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n for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (in Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Democrats Win Seats PAC Mailing Address 1071 Turin Branch Lane City State Zip Code FL 33326 Purpose of Disbursement 2010 Contribution Candidate Name Democrats Win Seats PAC Office Sought: House Senate Primary General Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) Childers For Congress Mailing Address PO Box 177 City State Zip Code Senate Primary General Other (specify) ▼ State Zip Code Senate Primary General Other (specify) ▼ Transaction ID: 18696449 Date of Disbursement 1 100 11 Candidate Name President State: MS District: 01 Full Name (Last, First, Middle Initial) Childers For Congress Mailing Address 151 Linden Road City State Zip Code Primary General Other (specify) ▼ Transaction ID: 18696449 Date of Disbursement Category/ Type Contribution Contribution Contribution Contribution Contribution Contribution Category/ Type Office Sought: X House President State: MS District: 01 Full Name (Last, First, Middle Initial) Friends Of Carolyn McCarthy Mailing Address 151 Linden Road City State Zip Code NY 11501 Purpose of Disbursement Contribution Category/ Type Contribution Category/ Type Contribution Category/ Type Office Sought: X House Senate Primary State Primary St			27	28a 28b 28c 29
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	NAME OF COMMITTEE (In Full) American Hospital Association PAC					
<u>/</u>	Full Name (Last, First, Middle Initial) Adam Smith For Congress Committee					Transaction ID: 18696453 Date of Disbursement
	Mailing Address PO Box 23626					10 M / 28 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Federal Way	State Zip Code WA 98093				Amount of Each Disbursement this Peri
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	Mailing Address 320 Kenarden Dr.					10 M / 28 / Y 2010
	City Highland Hts.	State Zip Code OH 44143				Amount of Each Disbursement this Peri
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	Candidate Name Rep. Steven C. LaTourette			ate Ty	gory/ oe	
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	Full Name (Last, Kirk For Senat	First, Middle Initial)					Transaction ID: 18700607 Date of Disbursement
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	City Winnetka		State IL	Zip Coo 60093			Amount of Each Disbursement this Perio
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	Full Name (Last, Collins For Se	First, Middle Initial)					Transaction ID: 18726010 Date of Disbursement
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	City Bangor		State ME	Zip Coo 04402			Amount of Each Disbursement this Perio
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	Candidate Name Sen. Susan M	. Collins	l eu			Category/ Type	
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	City Washington		State DC	Zip Code 20013		Amount of Each Disbursement this Pe
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	City St Paul		State MN	Zip Code 55104		Amount of Each Disbursement this Pe
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	Mailing Address	2150 River Pla	za Dr #150			111 D D D Y	ž 0 Ĭ 0 Š
	City Sacramento		State CA	Zip Code 95833		Amount of Each Disbursem	
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	Candidate Name Mr. Jeff Denha	am ————————————————————————————————————			Category/ Type		
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	Mailing Address	PO Box 2408				111 / 16 / Y	2 0 1 0 °
	City Loveland		State CO	Zip Code 80539		Amount of Each Disbursem	ent this Perio
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	Mailing Address	PO Box 7310				11	ž 0 1 0 °
	City Lakeland		State FL	Zip Code 33807		Amount of Each Disbursem	
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	Candidate Name Mr. Dennis Ro	ss			Category/ Type		
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City Northfield	State Zip Code IL 60093				Amou	ınt o	f Each	Disburs	emer	nt this	Period
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Full Name (Last, First, Middle Initial)					Trans	sacti	on ID:	: 1875	5119		
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Mailing Address PO Box 410					1 ^M 1	М	[/] 1	6 /	Y	2 0 1	0 Y
City Fowler	State Zip Code KS 67844				Amou	unt o	f Each	Disburs	emer	nt this	Period
Purpose of Disbursement Contribution			011	1	L.				20	0.00	O .
Candidate Name Mr. Timothy Huelskamp			tegory/ ype								
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Full Name (Last, First, Middle Initial) Huizenga For Congress					Date	of D	isburs	: 1875 ement			_
Mailing Address 441 William Court					1 1	М	[/] 1	6	2	2 0 1	0 \
City Zeeland	State Zip Code MI 49464				Amou	unt o	f Each	Disburs	emer	nt this	Period
Purpose of Disbursement Contribution			011		L.	_			40	0.00	0
Candidate Name Mr. William Huizenga			tegory/ ype								
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	Full Name (Last, First, Middle Initial) Jon Runyan For Congress										: 187 ement	'5520	7	
	Mailing Address PO Box 225								M .	D 1	D /	Y	ž 0 1 (O
	City Colonia	St N	ate	Zip Code 07067				Amou	ınt of	Each	Disbu	rseme	nt this	Period
	Purpose of Disbursement Contribution					01	1	L.				50	00.00)
	Candidate Name Mr. Jon Runyan					ateg Typ	ory/ e							
	Office Sought: X House Senate President	Х	Primary Other (spe					Contr	ibut	ion				
	State: NJ District: 03 Full Name (Last, First, Middle Initial) Richard Hanna For Congress	2010 Ger	neral Deb	ot Re						-	: 187	'5521	0	
	Mailing Address 2308 Genesee S	Street							of Di		ement 6	Y	ž 0 1 () Y
	City Utica		ate Y	Zip Code 13502				Amou	ınt of	Each	Disbu	rseme	nt this I	Perio
	Purpose of Disbursement Contribution	14		10302	Г	01	1					5(00.00)
	Candidate Name Mr. Richard Hanna						ory/							
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	Full Name (Last, First, Middle Initial) Tom Reed For Congress									sburs	: 187 ement	'5522	1	
	Mailing Address 99 W 1st Street	et						1 1	М	^D 1	6 /	Y	ž 0 1 (O Y
	City Corning		ate Y	Zip Code 14830				Amou	ınt of	Each	Disbu		nt this I	
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	Candidate Name Mr. Thomas Reed					ateg Typ	ory/ e							
	Office Sought: X House Senate President State: NY District: 29		Primary Other (spe					Contr	ibut	ion				
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	Full Name (Last, Chris Gibson F	First, Middle Initial) For Congress									-	187 ement	55223	3	
Ī	Mailing Address	PO Box 247							1 1	M /	^D 1	6 /	YZ	010	Y
	City Kinderhook			State NY	Zip Code 12106				Amou	ınt of	Each	Disbui		-	-
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ا	Candidate Name Mr. Chris Gibs Office Sought:	on X House	Dioburoo	ment For:	2010		ateg Typ	-							
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	Candidate Name Mr. George Ke	lly					ateg Typ	ory/ e							
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	Office Sought:	X House Senate President	X	ment For: Primary Other (spec					Contr	ibuti	on				
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	y Information copied from such Reports and S or commercial purposes, other than using the												
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/	American Hospital Association PAC												
	Full Name (Last, First, Middle Initial) Chuck Fleischmann for Congress					Trans		-			238		
						Date of	M /		D	/ Y	Ý	0 1 0	Y
	Mailing Address P.O. Box 11091 Suite 1000 James Bu												
	City Chattanooga	State Zip Code TN 37401				Amou	nt of	Each	Disb	ourse	ment	this F	Period
	Purpose of Disbursement Contribution			0.4				_			200	00.00	_
	Candidate Name		-	01 ateg	gory/								
	Mr. Charles Fleischmann Office Sought: X House Disl	oursement For: 2010		Тур	oe								
	Senate President	Primary Gene X Other (specify)	ral			Contr	ibut	ion					
	State: TN District: 03 201	0 General Debt Re											
	Full Name (Last, First, Middle Initial) Diane Black For Congress					Trans Date of					240		
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	Mailing Address 819 Plantation Blvd											0.10	
	City Gallatin	State Zip Code TN 37066				Amou	nt of	Each	Disb	urse	ment	this F	Period
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	Candidate Name Ms. Diane Black				gory/								
	Office Sought: X House Senate President Dist	oursement For: 2010 Primary Gene X Other (specify) ▼	ral			Contr	ibut	ion					
		0 General Debt Re											
	Full Name (Last, First, Middle Initial) Bill Flores For Congress					Trans Date		sburs	emen			* W	V
	Mailing Address PO Box 6207					1 1	IVI /	1	^D		2	0 Ť 0	
	City Bryan	State Zip Code TX 77805				Amou	nt of	Each	Disb	ourse	ment	this F	Period
	Purpose of Disbursement Contribution			01	1	L.	_				500	00.00	_
	Candidate Name Mr. Bill Flores		C	ateg Typ	gory/ be								
	Senate President	oursement For: 2010 Primary Gene X Other (specify)	ral	71		Contr	ibut	ion					
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	State: TX District: 17 201						_						

SCHEDULE B (FEC Form 3 TEMIZED DISBURSEMEN	for each	parate schedule(s) category of the	FOR LINE (check only	
		Summary Page	27	28a 28b 28c 29
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NAME OF COMMITTEE (In Full) American Hospital Association PA	AC	•		
Full Name (Last, First, Middle Initial) Jaime Herrera For Congress				Transaction ID: 18755243 Date of Disbursement
Mailing Address PO Box 1614				111 / 16 / 2010
City Ridgefield	State WA	Zip Code 98642		Amount of Each Disbursement this Perio
Purpose of Disbursement Contribution			011	5000.00
Candidate Name Mr. Jaime Herrera			Category/ Type	
Office Sought: X House Senate President	Disbursement For: Primary X Other (sp			Contribution
State: WA District: 03 Full Name (Last, First, Middle Initial)	2010 General De	ebt Re		Transaction ID: 18755245
Votetipton.Com				Date of Disbursement
Mailing Address PO Box 846				1 1 M
City Cortez	State CO	Zip Code 81321		Amount of Each Disbursement this Period
Purpose of Disbursement Contribution			011	2500.00
Candidate Name Mr. Scott Tipton			Category/ Type	
Office Sought: X House Senate President State: CO District: 03	Disbursement For: Primary X Other (sp			Contribution
Full Name (Last, First, Middle Initial) Hartzler for Congress				Transaction ID: 18755359 Date of Disbursement
Mailing Address PO Box 531				111 / 16 / 2010
City Harrisonville	State MO	Zip Code 64701		Amount of Each Disbursement this Perio
Purpose of Disbursement Contribution			011	5000.00
Candidate Name Ms. Vicky Hartzler			Category/ Type	
Office Sought: X House Senate President	Disbursement For: Primary X Other (sp	2010 General ecify) ▼		Contribution
State: MO District: 04	2010 General De	ebt Re		
SUBTOTAL of Disbursements This Page	(optional)			12500.00
TOTAL This Period (last page this line nu			<u> </u>	161350.00

S	CHEDULE B (FEC Form 3X)	Use separate sched	1110/c)	E NUMBER: PAGE 256 / 261
IT	EMIZED DISBURSEMENTS	for each category of Detailed Summary P	the Crieck of	nly one) 22
	y Information copied from such Reports and State for commercial purposes, other than using the nar	•	, , ,	, ,
\	NAME OF COMMITTEE (In Full)			
/	American Hospital Association PAC			
	Full Name (Last, First, Middle Initial)			Transaction ID: 18726012
	McNerney For Congress			Date of Disbursement
	Mailing Address 6520 Village Parkway Second Floor			M M / D B / Y Y Y D Y Y D Y Y D Y D Y D Y D Y D Y
	City Dublin	State Zip Code CA 94568		Amount of Each Disbursement this Period
	Purpose of Disbursement 2010 Recount Donation		011	2000.00
	Candidate Name Rep. Jerry McNerney		Category/ Type	
	Office Sought: X House Senate President Disburs	sement For: Primary Gen Other (specify)	neral	2010 Recount Donation
	State: CA District: 11			

SUBTOTAL of Disbursements This Page (optional)	•	2000.00
TOTAL This Period (last page this line number only)	—	2000.00

ITEMIZED INDEPENDENT EX	PENDITURES			PAGE 257 / 261 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER
American Hospital Association PAC				C C00106146
Check if 24-hour notice 48	-hour notice			
Full Name (Last, First, Middle, Initial) of Pa	iyee		Date	
GMMB			M M /	15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address			Amount	
1010 Wisconsin Ave NW Suite 800				119092.00
City	State Zip C	ode	Transaction	ID: 18672731
Washington	DC 2000		Office Sought:	
Purpose of Expenditure TV Advertising and Production	Category/	004		Senate District: 18 Presidential
	Туре			
Name of Federal Candidate supported or C Rep. Dennis A. Cardoza	Opposed by expenditure:		Check One:	X Support Oppose
·			Disbursement	For: Primary X General
Calendar Year-To-Date Per Election	11000	0.00		r (specify):
for Office Sought	11909	2.00	2010	
Full Name (Last, First, Middle, Initial) of Pa	yee		Date	
McCarthy Marcus Hennings, Ltd.			1 0 /	19 / Y Y Y Y Y
Mailing Address 1850 M Street, NW			Amount	
Suite 235				5183.48
City	State Zip C	ode	Transaction	ID : 18781064
Washington	DC 2003		Office Sought:	
Purpose of Expenditure	Catagory			Senate District: 12
Television Production	Category/ Type	004		Presidential
Name of Federal Candidate supported or 0	Opposed by expenditure:		Check One:	X Support Oppose
Rep. Patrick J. Tiberi			Disbursement	For: Primary X General
Calendar Year-To-Date Per Election	12678	3.48	2010	r (specify) :
for Office Sought				
(a) SUBTOTAL of Itemized Independent Exp	enditures			124275.48
(b) SUBTOTAL of Unitemized Independent E				
(b) SOBTOTAL of Officernized independent is	expenditures			
(c) TOTAL Independent Expenditures			L	
Under penalty of perjury I certify that the independ or at the request or suggestion of, any candidate of committee) any political party committee or its age	or authorized committee or agent o			
Ms. Melinda Hatton Signature		Date 12		0 1 0

ITEMIZED INDEPENDENT EXPENDITURES		PAGE 258 / 261 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full) American Hospital Association PAC		FEC IDENTIFICATION NUMBER
7 Time Hour Proposition 17 7 C		C C00106146
Check if 24-hour notice 48-hour notice		
Full Name (Last, First, Middle, Initial) of Payee	Date M M	
McCarthy Marcus Hennings, Ltd.	1 0	19 / 2010
Mailing Address	Amount	
1850 M Street, NW Suite 235		5093.48
City State Zip C	Transact	tion ID: 18781202
Washington DC 2003	011.	ght: X House State: NE
Purnose of Expenditure		Senate District: 02
Television Production Category/	004	Presidential
Name of Federal Candidate supported or Opposed by expenditure:	Check One	e: X Support Oppose
Rep. Lee Terry	Disbursem	nent For: Primary X General
		Other (specify):
Calendar Year-To-Date Per Election 8349		(
for Office Sought		
Full Name (Last, First, Middle, Initial) of Payee	Date	
Mentzer Media	1, 0	19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address	Amount	
600 Fairmount Avenue		78400.00
Suite 306	Transact	tion ID: 18780598
City State Zip C Towson MD 2128	ode	
Towson MD 2128 Purpose of Expenditure	500	Senate District: 02
Television Advertisi-	004	Presidential
ng Type	Check One	e: X Support Oppose
Name of Federal Candidate supported or Opposed by expenditure: Rep. Lee Terry	Offeck Offe	e: X Support Oppose
nep. Lee Terry	Disbursem	nent For: Primary X General
Calendar Year-To-Date Per Election		Other (specify):
for Office Sought	3.48 2010	
(a) SUBTOTAL of Itemized Independent Expenditures		83493.48
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures reported herein v	wore not made in cooperation	consultation, or concert with
or at the request or suggestion of, any candidate or authorized committee or agent or committee) any political party committee or its agent.		
Ms. Melinda Hatton	Pate 12 02	2 0 1 0
Signature		
-		

ITEMIZED INDEPENDENT EXPENDITURES	PAGE 259 / 261 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER
American Hospital Association PAC	C C00106146
Check if 24-hour notice 48-hour notice	O correction
Full Name (Last, First, Middle, Initial) of Payee	Date
Mentzer Media	M M / D D / Y Y Y Y Y 1 1 9 / 2 0 1 0
Mailing Address 600 Fairmount Avenue Suite 306	Amount 121600.00
City State Zip Code	Transaction ID: 18780835
Towson MD 21286	Office Sought: X House State: OH
Purpose of Expenditure Television Advertising Category/ Type Out Type	Senate District: 12 Presidential
Name of Federal Candidate supported of Opposed by expenditure.	Check One: X Support Oppose
Rep. Patrick J. Tiberi	Disbursement For: Primary X General
Calendar Year-To-Date Per Election	Other (specify) :
for Office Sought	2010
Full Name (Last, First, Middle, Initial) of Payee	Date
Multi Media Services Corporation	1.0 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address	Amount
915 King Street	106000.00
City State Zip Code	Transaction ID: 18682157
Alexandria VA 22314	Office Sought: X House State: PA
Purpose of Expenditure Category/	Senate District: 06 Presidential
ng & Production	
Name of Federal Candidate supported of Opposed by expenditure.	Check One: X Support Oppose
Rep. James W. Gerlach	Disbursement For: Primary X General
	Other (specify) :
Calendar Year-To-Date Per Election 106000.00 for Office Sought	2010
(a) SUBTOTAL of Itemized Independent Expenditures	227600.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in co or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the recommittee) any political party committee or its agent.	
Ms. Melinda Hatton Signature Date 12	D D D Y Y Y Y Y D D D D D D D D D D D D

ITEMIZED INDEPENDENT EX	PENDITURES			PAGE 260 / 261 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER
American Hospital Association PAC				C C00106146
Check if 24-hour notice 48-	hour notice			
Full Name (Last, First, Middle, Initial) of Pa	yee		Date	
Multi Media Services Corporation	•		M M /	19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address			Amount	
915 King Street				35000.00
City	State Zip	Code		n ID: 18683637
Alexandria		314	Office Sought	
Purpose of Expenditure Radio Advertising & Production	Category Type	1004		Senate District: 15 Presidential
Name of Federal Candidate supported or C	pposed by expenditure:		Check One:	X Support Oppose
Rep. Charles W. Dent			5	5
			Disbursement	•
Calendar Year-To-Date Per Election	350	00.00	Othe 2010	er (specify):
for Office Sought	330	00.00	2010	
Full Name (Last, First, Middle, Initial) of Pa	yee		Date	
OnMessage Inc.			1 0 /	19 / Y Y Y Y Y Y Y Y
Mailing Address			Amount	
815 Slaters Lane				123500.00
City	State Zip	Code		n ID: 18681887
Alexandria	•	314	Office Sought	: House State: IL
Purpose of Expenditure	Catagor	,		X Senate District:
Radio Advertising & Production	Category Type	1004		Presidential
Name of Federal Candidate supported or C	opposed by expenditure:		Check One:	X Support Oppose
Rep. Mark Steven Kirk			Disbursement	For: Primary X General
				er (specify):
Calendar Year-To-Date Per Election for Office Sought	1235	00.00	2010	s (specify)
(a) SUBTOTAL of Itemized Independent Exp	enditures			158500.00
(b) SUBTOTAL of Unitemized Independent E	expenditures			
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independ or at the request or suggestion of, any candidate of committee) any political party committee or its age	r authorized committee or agen			
Ms. Melinda Hatton Signature		Date 12		2010

remized independent ex	PAGE 261 / 261	
		FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER
American Hospital Association PAC		C C00106146
Check if 24-hour notice 48-	hour notice	
Full Name (Last, First, Middle, Initial) of Pag	yee	Date
Multi Media Services Corporation		1.0 / D D / Y Y Y Y Y Y Y
Mailing Address		Amount
915 King Street		65000.00
City	State Zip Code	Transaction ID: 18685039
Alexandria	VA 22314	Office Sought: X House State: PA
Purpose of Expenditure Television Advertisi- ng & Production	Category/ Type 004	Senate District: 15 Presidential
Name of Federal Candidate supported or Opposed by expenditure:		Check One: X Support Oppose
Rep. Charles W. Dent		Disbursement For: Primary X General
Calendar Year-To-Date Per Election for Office Sought	100000.00	Other (specify) : 2010
		l

(a) SUBTOTAL of Itemized Independent Expenditures		65000.00
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		658868.96
Under penalty of perjury I certify that the independent expenditures reporte or at the request or suggestion of, any candidate or authorized committee committee) any political party committee or its agent.	•	
Ms. Melinda Hatton Signature	Date 12 0	2 2 0 1 0